

# **Users' Guide to USAID/Washington Population, Health and Nutrition Programs**

Center for Population, Health and Nutrition  
Bureau for Global Programs, Field Support and Research  
U.S. Agency for International Development

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## Forward:

The Users' Guide to USAID/Washington Population, Health and Nutrition Programs is a guide to the functions, staff, and projects of USAID's Population, Health, and Nutrition (PHN) sector.

Part I of the guide provides a basic overview of USAID's PHN program, as well as a short description of the PHN Center and the offices that comprise it. Part II briefly describes the service and functions of the Office of Field and Program Support. Parts III, IV, and V give a comprehensive listing of PHN projects, including selected regional bureau projects. The descriptions are organized by office, alphabetically within the offices by division, and alphabetically within the divisions by project title. Each project/activity description includes a short summary of the services and activities that each performs, as well as names of contractors and USAID contact persons. Additional information, such as project/activity number, agreement number, and completion date are given. Part VI of the guide includes contact lists for parties listed in this Guide, as well as other useful resources.

The project descriptions from this Users' Guide are available on the World Wide Web, and may be found at the Web address listed below. Some portions of the Guide, such as the phone lists contained in the indices, are not available on the Internet, but may be provided upon request. If you wish to order more copies of the User's Guide, please contact:

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PHN homepage: [http://www.info.usaid.gov/pop\\_health/](http://www.info.usaid.gov/pop_health/)  
Users' Guide online: [http://www.info.usaid.gov/pop\\_health/ug.htm](http://www.info.usaid.gov/pop_health/ug.htm)

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# **Part I**

## **Center for Population, Health and Nutrition**

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Gary Cook

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# Introduction to the Center for Population, Health and Nutrition (PHNC)

## The Challenge Ahead

For thirty years, USAID has worked to improve the quality of life for millions of people around the world. Through its global programs in family planning and reproductive health, infectious disease prevention and control, child survival, maternal health and other life-saving areas, USAID has prevented suffering and saved countless lives. However, the current state of population, health and nutrition worldwide reveals daunting challenges:

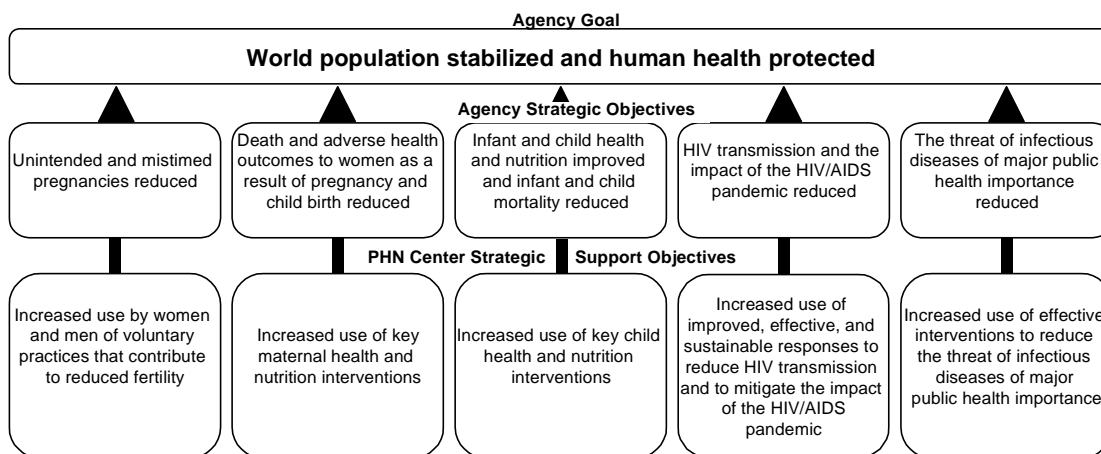
- World population is expected to increase in 30 years from 5.9 billion today to over 8 billion, yet over 150 million women have an expressed unmet need for family planning.
- Over 580,000 women die annually from preventable pregnancy-related causes. More than 12 million children under five still die each year in the developing world.
- The total number of HIV-infected persons worldwide is expected to double from 20 million to 40 million by the year 2000.
- Over half of all child deaths are thought to be associated with malnutrition.

## USAID's Strategy for its Population, Health and Nutrition (PHN) Program

Based on these challenges and the lessons learned through its extensive development experience, USAID's goal in the population, health and nutrition sector is to **stabilize world population and protect human health**. In order to achieve this goal, the Agency has adopted a strategy based on five objectives:

1. Unintended and mistimed pregnancies reduced
2. Death and adverse health outcomes to women as a result of pregnancy and child birth reduced
3. Infant and child health and nutrition improved and infant and child mortality reduced
4. HIV transmission and the impact of the HIV/AIDS pandemic reduced
5. The threat of infectious diseases of major public health importance reduced

### Strategic Framework



The Population, Health and Nutrition Center's (PHNC) program focuses on improving the quality, availability, and use of key services in family planning, reproductive health, child survival, HIV/AIDS, infectious diseases and other health areas, with special cross-cutting emphases on sustainability, gender and integration of interventions.

## **Funding**

USAID strongly supports PHN activities through a variety of programs in many countries. From 1985 to 1997, USAID provided approximately \$10.555 billion dollars in PHN assistance to developing countries, making it the largest international donor in this sector in the world. In FY 1998, appropriations for the sector totaled \$935 million.

## **Programming and Resource Allocation**

In addition to organizing priorities around its five strategic objectives, the PHNC has focused on selected priority countries. These countries, as shown in the **Joint Programming and Planning Country (JPPC) Strategy**, are selected on the basis of program efficiency and potential impact, as well as any special considerations.

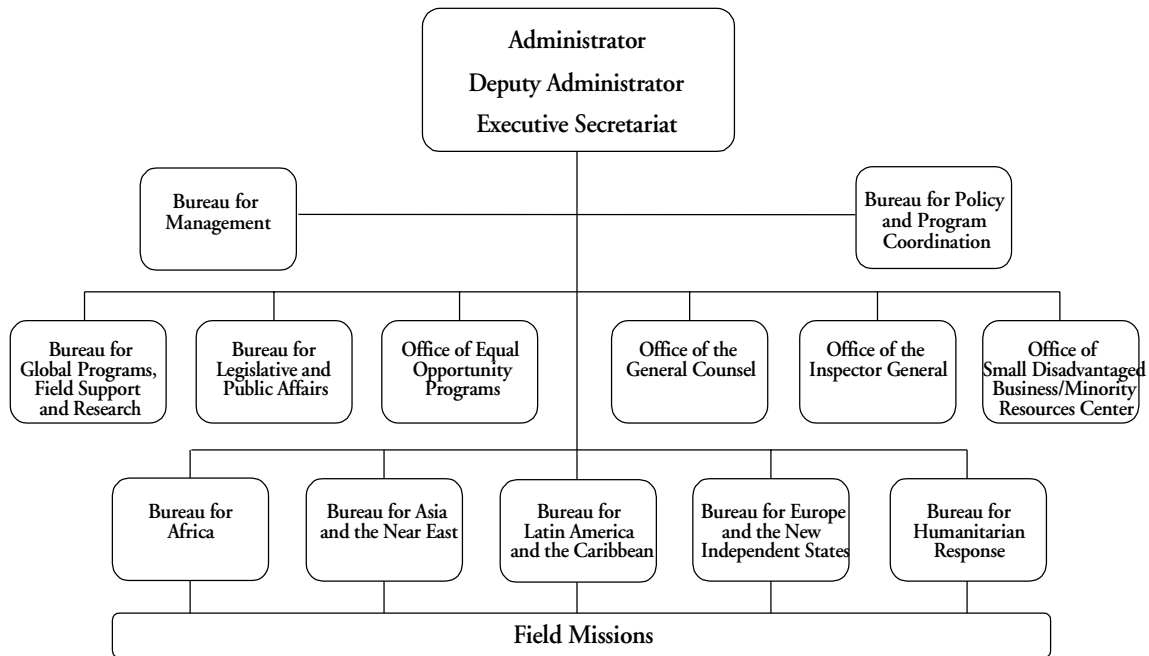
**Joint Programming** countries are those with the highest potential for worldwide (as well as local or regional) impact in the PHN arena. A significant level of PHNC resources, both in terms of technical staffing and field support, will be committed to achieving results in these countries. **Joint Planning** countries are other sustainable development countries with lesser global impact, but which have important PHN sector activities and can access PHNC technical support through field support funding. Certain countries are termed **Special Circumstance** countries because of investments made to date, policy considerations, or crisis conditions.

## **Agency Structure**

Along with four Regional Bureaus (Africa, Asia & Near East, Latin America & Caribbean and Europe/New Independent States) and the Bureau for Humanitarian Response (BHR), USAID's **Global Bureau** provides technical and programmatic expertise to USAID's field offices ("missions") overseas. Formally called the "Bureau for Global Programs, Field Support and Research," the Global Bureau is divided into five "Centers of Excellence." The PHNC is one such Center, and corresponds to one of the Agency's five focus areas.

The Global Bureau focuses on **global leadership, technical support to the field, and research and evaluation**. The PHNC performs these functions by forging strong relationships with its partners, which include USAID field missions and regional bureaus, the NGO community, host governments, multilateral organizations, and other bilateral agencies.

## U.S. Agency for International Development



**Global Leadership:** USAID is a recognized world leader in the population, health and nutrition sector and has contributed to major innovations in this field, such as: new and improved contraceptive methods, improved public and private sector service delivery systems, a global Child Survival initiative, and the mobilization of the international community in response to the HIV/AIDS pandemic. The strength of the PHNC lies in its close working relationship with the field missions.

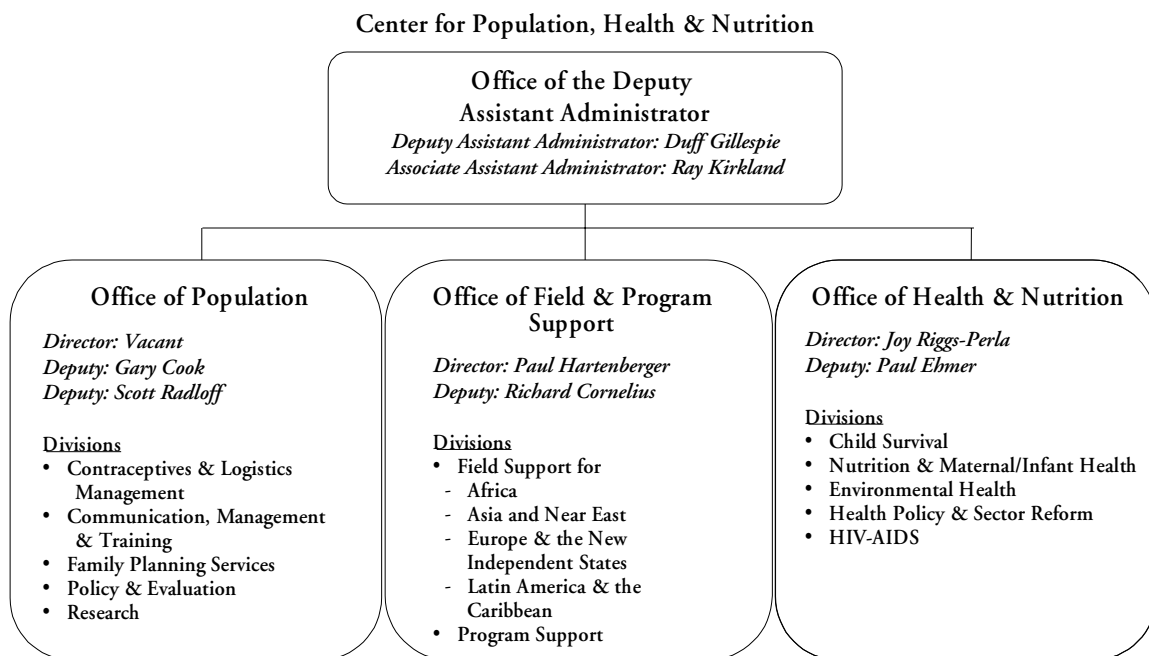
**Technical Support to the Field:** As home to the PHN technical staff, the PHNC provides support to missions and addresses a wide range of field needs, enabling missions to benefit from USAID's worldwide experience and knowledge. The PHNC has developed projects that provide access to state-of-the-art technical assistance through a network of Cooperating Agencies (CAs).

**Research and Evaluation:** In this area, a future-focused approach is essential. The results of USAID-supported biomedical, operations, demographic, evaluation, applied, and social science research form the foundation of future services and programs worldwide. The Congress, the general public, and other international agencies and partners rely heavily on these data and analyses.

The PHNC's global leadership, technical support to the field, and research and evaluation functions are closely linked. Needs are identified in the field, research is undertaken to determine how best to respond to those needs, and on-the-ground experience feeds back into program development and new initiatives. The Center also plays an important role in coordinating with other donors.

## Structure of the PHNC

The PHNC is composed of the complementary objectives and activities of three offices: **the Office of Population, the Office of Health and Nutrition, and the Office of Field and Program Support**. Each office contributes to the Agency goal of stabilizing world population and protecting human health. The divisions and their functions are described below.



### **The Office of Population (POP):**

**Contraceptives and Logistics Management Division (CLM):** Provides a centralized system for contraceptive procurement, maintains a database on commodity assistance, and supports a program for contraceptive logistics management.

**Communication, Management, and Training Division (CMT):** Increases the awareness, acceptability, and use of family planning methods and expands and strengthens the managerial and technical skills of family planning and health personnel.

**Family Planning Services Division (FPSD):** Increases availability and quality of family planning and related reproductive health services through strengthening government programs, local private voluntary organizations, for-profit organizations, and commercial channels.

**Policy & Evaluation Division (P&E):** Collects and analyzes family planning and other reproductive health information; improves the policy environment for family planning and reproductive health services; and strengthens methodologies for evaluation of family planning and reproductive health programs.

**Research Division (R):** Supports biomedical research to increase understanding of contraceptive methods and to develop new fertility regulation technologies and conducts operations research to improve the delivery of family planning and reproductive health services.

#### **The Office of Health and Nutrition (HN):**

**Child Survival Division (CS):** Provides technical guidance and assists in strategy development and program implementation in child survival, including interventions aimed at child morbidity and infant and child nutrition.

**Environmental Health Division (EH):** Assists in the design, implementation, research and evaluation of environmental health activities and issues, and infectious disease programs.

**Health Policy and Sector Reform Division (HPSR):** Assists in the design, implementation, research and evaluation of health and nutrition policy reform, management and financing issues, including health care financing, quality assurance, pharmaceuticals, private sector and data activities.

**HIV/AIDS Division (HIV-AIDS):** Provides technical guidance and assists in strategy development, program design and implementation of HIV/AIDS control activities worldwide.

**Nutrition and Maternal/Infant Health Division (NMH):** Provides technical guidance and assists in strategy development and program implementation in nutrition and women's health and the health of the newborn.

#### **The Office of Field and Program Support (OFPS):**

This office is a service-oriented unit, focusing on translating state-of-the-art technical direction into appropriate field strategies and programs. OFPS ensures that programs achieve results both globally and at the country level. OFPS has two major functions, as follows:

**Field Support:** Coordinates the country teams, which consist of a country coordinator and resource persons, for each country included in the JPPC strategy. The country teams serve as the PHN liaison for the field missions. The Office works with the Global Bureau, Regional Bureaus, other donors and the field, and provides significant technical input into strategic planning and performance monitoring.

**Program Support:** Carries out programming and budgeting for the Center, personnel management, and other tasks related to the global management of PHN resources.

# **Part II**

## **Project Directory**

### **Office of Population**

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**Deputy Director**, Scott Radloff

**Contraceptives and Logistics Management Division**  
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# Central Contraceptive Procurement

<b>Cooperating Agency</b>	N/A
<b>Project Number</b>	936-3057
<b>Contract Number</b>	Various
<b>Duration</b>	1990-2003
<b>Geographic Scope</b>	Worldwide

**Purpose:** To provide an efficient mechanism for consolidated USAID purchases of contraceptives based on the transfer of all funds from all USAID accounts that support contraceptive procurement to a single central procurement account at the beginning of each operational year.

**Description:** This project was established in FY 1990 to provide an efficient central contraceptive procurement mechanism for all USAID offices whose programs require contraceptive supplies. Funds are transferred annually to this project through field support and OYB transfers from each of the USAID accounts that support contraceptive procurement. G/PHN/POP directs the use of these funds through a series of procurement contracts to provide the contraceptive supplies required by USAID programs worldwide. This project consolidates the procurement actions, but leaves responsibility for the estimation of contraceptive needs in the USAID offices that support family planning delivery systems. The central procurement system undertakes the purchase of several differently-packaged condoms; oral contraceptive pills; vaginal foaming tablets; NORPLANT® implants; the Copper T-380A IUD; female condoms; and Depo-Provera. For details on formulation, brands, prices, contract terms, and ordering procedures, please refer to G/PHN/POP guidance for estimating contraceptive procurement needs. All shipping and warehousing of USAID-supplied contraceptives is provided by Panalpina, Inc.

The Central Contraceptive Procurement (CCP) project also provides a mechanism for independent testing of the contraceptives purchased by USAID to monitor quality assurance of contraceptives donated to USAID programs. The contraceptive quality assurance component of CCP has two features: (1) pre-acceptance surveillance and testing of contraceptives purchased by USAID to ensure that the product complies with the contract specifications, and (2) to test contraceptives already in the field in response to complaints and/or concerns about the product quality. The quality assurance testing is implemented by Family Health International as part of the Contraceptive Technology Research Project (See page 44).

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Contractors may change annually because of competitive contract procedures. Fiscal year 1999 contractors include: Aladan Corporation; FEI Products, Inc.; Leiras Pharmaceutical; Ortho-McNeil Pharmaceutical; Wyeth-Ayerst International Ltd.; Pharmacia & Upjohn Worldwide; Female Health Company; Panalpina, Inc.





# Family Planning Logistics Management (FPLM/CDC)

<b>Cooperating Agency</b>	Centers for Disease Control and Prevention (CDC)
<b>Project Number</b>	936-3038.01
<b>Agreement Number</b>	HRN-P-00-97-00014-00
<b>Duration</b>	10/97-9/02
<b>Geographic Scope</b>	Worldwide

**Purpose:** To improve the management and operation of family planning (FP) programs in developing countries through the use of more effective logistics systems, the collection and analysis of demographic data, program evaluation data, and the use of targeted epidemiological activities.

**Description:** This multi-year PASA with the Division of Reproductive Health at the Centers for Disease Control and Prevention (DRH/CDC) provides technical assistance to developing country family planning organizations in six areas: 1) logistics management - in collaboration with John Snow, Inc. (JSI), to improve the ability of local FP organizations to more effectively and efficiently manage their contraceptive supplies; 2) reproductive health surveys - to assist FP organizations in determining the patterns of contraceptive knowledge and use; 3) reproductive health epidemiology - to provide technical assistance and training on epidemiological issues related to contraceptive safety and reproductive health in collaboration with MEASURE partners; 4) adolescent reproductive health - to collaborate with USAID and service delivery cooperating agencies on adolescent reproductive health in collaboration with the FOCUS partners; 5) health services integration and management - to provide technical assistance and to improve the quality and effectiveness of health services on an ad-hoc basis; and 6) and reproductive health for refugees - providing technical assistance to relief organizations and documenting the "Burden of Disease" of reproductive health within complex humanitarian emergency and refugee settings.

With its work in reproductive health surveys, the CDC PASA represents the fifth component of the MEASURE Results Package. For reference to a complete description of the CDC component of MEASURE, see the MEASURE CDC project description on page 38.

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# Family Planning Logistics Management (FPLM/JSI)

<b>Cooperating Agency</b>	John Snow, Inc. (JSI)
<b>Project Number</b>	936-3038.02
<b>Contract Number</b>	CCP-C-00-95-00028-00
<b>Duration</b>	9/95-9/00
<b>Geographic Scope</b>	Worldwide

**Purpose:** To improve host country program's supply chain management capabilities in order to assure the continuous availability of high quality contraceptives and selected essential health products.

**Description:** FPLM works in approximately 30 countries and through three regional initiatives to improve local capability in: 1) warehouse and distribution management; 2) logistics information systems; 3) forecasting and requirements estimation; 4) donor coordination; 5) pipeline planning and procurement; and 6) organizational development. FPLM provides short- and long-term technical assistance, and conducts short-term training in logistics management at the country, regional, and international levels.

Several areas receive new emphasis under FPLM III, including: 1) applying private sector best practices in logistics, whether from the commercial and retail sectors or academia; 2) elevating logistics to the policy level, where the logistics implications of health sector reform, decentralization, integration, and privatization can be addressed; 3) improving country programs' prospects for sustainability by coordinating multiple donors, planning for and making progress toward contraceptive self-reliance, and utilizing local logistics expertise; and 4) documenting the impact of logistic system improvements and the importance of logistics in realizing program impact, quality of care, and cost-effectiveness. FPLM activities are managed out of Washington and several country offices.

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# Family Planning Management Development (FPMD)

<b>Cooperating Agency</b>	Management Sciences for Health (MSH)
<b>Project Number</b>	936-3055
<b>Agreement Number</b>	CCP-A-00-95-00000-00
<b>Duration</b>	9/95-9/00
<b>Geographic Scope</b>	Worldwide

**Purpose:** To help national and local family planning programs and organizations develop their capability to successfully plan and manage sustainable family planning programs.

**Description:** FPMD provides a broad range of technical assistance to address the many management issues that challenge national and local family planning programs and organizations. Working in collaboration with client organizations, FPMD conducts needs assessments and assists in the development of long-term Management Development Plans, which together guide all technical assistance activities. Technical assistance is based on four major strategies: strengthening institutions through technical assistance focused on the service delivery point; designing innovative management tools that can be used or modified to suit specific needs of the organization; developing and using local management capacity; and using state-of-the-art communications technologies to make management tools, innovations, and information widely available to family planning professionals worldwide.

Assistance and training include:

- Strategic planning;
- Financing for sustainability;
- Operational work planning;
- Financial management;
- Marketing, pricing, and costing;
- Human resource management;
- Management information systems;
- Continuous Quality Improvement (CQI);
- Program monitoring and evaluation;
- Communications technologies;
- Management training and consulting;
- Board and staff relations.

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# Information, Education, and Communication Support Project (IEC)

<b>Cooperating Agency</b>	Johns Hopkins University (JHU)
<b>Project Number</b>	936-3052
<b>Agreement Number</b>	CCP-A-00-96-90001-00
<b>Duration</b>	11/95-11/00
<b>Geographic Scope</b>	Worldwide

**Purpose:** To support the effective delivery of appropriate information on family planning (FP) and reproductive health (RH) to developing country audiences.

**Description:** Information, Education and Communication Support Project (IEC), also known as Population Communication Services Project (PCS), provides technical and financial support for communications projects in developing countries in all stages of communication program design and implementation, including audience identification, message design, media mix, production of materials, interpersonal communication, and evaluation. The project emphasizes the use of both public and private sector organizations engaged in FP/RH communication and the development of communication planning and implementation capability in developing country institutions. Specific forms of assistance include: 1) assessing communication needs of FP and RH programs using qualitative and quantitative research; 2) designing and implementing communication strategies aimed at a range of outcomes, including community mobilization, interpersonal communication, policy change, and entertainment/education in the media; 3) development, pre-testing, and revision of communications materials and methods; 4) evaluation; 5) IEC training and curriculum development; 6) providing translations and copies of previously successful communications materials to population programs; and 7) marketing of services.

**Subcontractors:** Academy for Educational Development (AED); The Centre for Development and Population Activities (CEDPA); Prospect Associates; and Save the Children.

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# Population Fellows Program (Michigan Fellows)

<b>Cooperating Agency</b>	University of Michigan
<b>Project Number</b>	936-3054
<b>Agreement Number</b>	CCP-A-00-95-00004-00
<b>Duration</b>	4/95-4/00
<b>Geographic Scope</b>	Worldwide

**Purpose:** 1) To provide family planning programs in developing countries with professional technical expertise in population and related areas, such as environment and reproductive health; 2) to provide international training for recent university graduates or mid-career professionals through fellowships overseas; and 3) to provide a forum for policymakers to discuss the links between population growth, environmental degradation and international security conflicts.

**Description:** This project provides programs in the private and the public sectors with the skills of fellows who are recent graduates or mid-career professionals in population and development-related fields. It simultaneously provides entry level professionals with valuable field experience and training. The technical assistance and training provided covers a wide range of program needs: data collection and analysis; policy formulation and implementation; communication and education; training; management; service delivery; and program evaluation. Fellows are recruited through various means and are selected competitively on the basis of their academic and professional experience, and according to the skills required by the host institution.

Fellows are placed in developing country governmental and non-governmental agencies and universities, and in national and international organizations which support population and related activities in developing countries. Fellowship terms are 18 to 24 months.

*Population-Environment Fellows:* The Population-Environment Fellows Program has the same objectives as the Population Fellows Program. Population-Environment Fellows work primarily in the following areas: integrated community-based development programs; linked population-environment service delivery; buffer zone management; policy analysis and research of population-environment dynamics; and participatory rural analysis.

*Environmental Change and Security Project (ECSP):* This project is administered by the Smithsonian Institution's Woodrow Wilson Center. Through meetings, publications, and the activities of the Director, the ECSP explores a wide range of academic and policy-related topics involving the population-environment-security nexus. Through these activities, ECSP gains the attention and participation of policymakers, resulting in the consideration of population-environment-security issues in the broader context of U.S. foreign policy.

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# Population Information Program (PIP)

<b>Cooperating Agency</b>	Johns Hopkins University (JHU)
<b>Project Number</b>	936-3052
<b>Agreement Number</b>	HRN-A-00-97-00009-00
<b>Duration</b>	4/97-3/02
<b>Geographic Scope</b>	Worldwide

**Purpose:** To improve the quality of family planning and reproductive health services in developing countries by providing a variety of information services.

**Description:** The Population Information Program (PIP) supplies information to health and population professionals and policymakers in the developing world. These services provide family planning professionals, policymakers, researchers, and others with up-to-date and comprehensive analytical reviews, responses to specific inquiries, subject bibliographies, sample communication materials, and other materials and resources to meet a wide variety of needs for scientific, technical, and programmatic information, guidance, and decision-making. These services help to improve program planning and policy decision-making by providing developing country professionals access to lessons learned in programs worldwide; supplying information about the latest developments in relevant health sciences and advances in family planning technology and practice; and drawing attention to new policy initiatives.

Some of these services include *Population Reports*, POPLINE, and the Media/Materials Clearinghouse. The authoritative review, *Population Reports*, covers important issues in population, family planning, and related health matters. The journal is published four times a year in English, French, and Spanish with selected issues in other languages. The computerized bibliographical database, POPLINE, is the world's largest database on population, family planning, and related reproductive health literature. The Media/Materials Clearinghouse provides sample communication materials on family planning and STD/HIV prevention, ranging from flipcharts to videos, from a collection of 35,000 materials from around the world, along with information on materials development and new communication materials. The peer-reviewed journal *International Family Planning Perspectives*, published by the Alan Guttmacher Institute, receives partial support from PIP.

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# Population Leaders Program (PLP)

<b>Cooperating Agency</b>	Public Health Institute (PHI)
<b>Project Number</b>	936-3070
<b>Agreement Number</b>	CCP-A-00-94-00014-00
<b>Duration</b>	9/94-9/00
<b>Geographic Scope</b>	Worldwide

**Purpose:** To enhance the effectiveness of USAID-sponsored population/family planning, and reproductive health programs by providing technical and management consultation and offering an executive education forum to participating technical experts to enhance their leadership capacity.

**Description:** The Population Leaders Program (PLP) recruits, places, and administratively supports mid-to senior-level advisors in USAID, host government, and non-governmental organizations for an assignment of two years. Assignments are governed by a scope of work developed in collaboration with the host organization. Leadership and management skills will be strengthened through mentoring and training and a network of population/family planning/reproductive health advisors will be developed to provide ongoing leadership to the field.

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# Primary Providers' Training and Education in Reproductive Health (PRIME)

<b>Cooperating Agency</b>	INTRAH, University of North Carolina
<b>Project Number</b>	936-3072
<b>Contract Number</b>	CCP-C-00-95-00005-00
<b>Duration</b>	1/95-1/00
<b>Geographic Scope</b>	Worldwide

**Purpose:** To improve access to and quality of family planning and reproductive health care services.

**Description:** PRIME is a worldwide human resources development project which provides assistance in family planning and reproductive health care training to primary providers, including nurses, midwives, traditional birth attendants, and potential service providers in the non-formal sector. PRIME is designed to establish sustainable family planning and reproductive health care training systems through the development of national strategic training and human resources development plans. The project focuses on the linkage between training and service delivery for the improvement of service quality and access. Project interventions to enhance the effectiveness and efficiency of primary providers include policy activities to reduce medical and regulatory barriers, evaluation of impact data, and special studies.

**Subcontractors:** American College of Nurse Midwives (ACNM); International Projects Assistance Services (IPAS); Program for Appropriate Technology in Health (PATH); Training Resources Group (TRG); AMZCO Surgical Devices, Inc.; and Overseas Marketing Booksource, Inc.

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# Training in Reproductive Health III

<b>Cooperating Agency</b>	JHPIEGO Corporation
<b>Project Number</b>	936-3069
<b>Agreement Number</b>	HRN-A-00-98-00041-00
<b>Duration</b>	10/98-9/03
<b>Geographic Scope</b>	Worldwide

**Purpose:** The new Training in Reproductive Health (TRH) III Project establishes integrated training systems for family planning and reproductive health by developing, disseminating and implementing national policy and service delivery guidelines; developing a network of trainers to provide expert technical and training support in the pre-service and in-service arenas; and helping ensure management support for the entire training system.

**Description:** The TRH Project builds on JHPIEGO's expertise in developing cost-effective learning approaches for low-resource settings, including self-paced learning through structured on-the-job training, computer-based training and distance learning, using emerging information technologies. These approaches are designed to meet a broad range of needs- from strengthening in-service training and pre-service education, to providing continuing education for faculty and trainers. The TRH Project also helps its host-country partners to strengthen and support national training institutions, develop training materials and curricula based on national health and medical policies, and implement training.

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# Commercial Market Strategies (CMS)

<b>Cooperating Agency</b>	Deloitte Touche Tohmatsu
<b>Project Number</b>	936-3085
<b>Contract Number</b>	HRN-C-00-98-00039-00
<b>Duration</b>	10/98-9/03
<b>Geographic Scope</b>	Worldwide

**Purpose:** To increase the use of quality family planning and other health products and services through private sector partners and commercial strategies.

**Description:** The Commercial Market Strategies (CMS) contract will achieve three intermediate results: 1) increased demand from the private sector, 2) increased supply through commercial approaches, and 3) improved environment for sustainable delivery of family planning and other health products and services through the private sector. Initially, CMS will provide follow-on support for Missions with activities under the SOMARC III contract. However, over the life of the contract, CMS will go beyond social marketing of contraceptives to focus on service delivery, will apply innovative financing mechanisms, and will develop models for third-party payment and managed health care.

CMS will also manage the Summa Foundation, a financing mechanism with a global mandate, and will guide the PHN Center in developing new strategies and cutting-edge approaches for work with the commercial sector. This mandate will be translated into pilot interventions, developing innovative health-care financing mechanisms, research, crosscutting evaluations, and the dissemination of lessons learned.

By the end of the contract, CMS will have: 1) increased the role of the private and commercial sectors in providing family planning and other health products and services; 2) covered underserved, rural and urban areas and populations; 3) improved governments' ability to rationalize resources and collaborate with the commercial sector; 4) increased the funds and knowledge to expand health coverage; and, 5) leveraged up to \$50 million from partnerships with the private and commercial sectors.

**Subcontractors:** Abt Associates, Inc.; Meridian Development Foundation; and Population Services International (PSI).

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# Family Planning Service Expansion and Technical Support II (SEATS II)

<b>Cooperating Agency</b>	John Snow, Inc. (JSI)
<b>Project Number</b>	936-3048
<b>Contract Number</b>	CCP-C-00-94-00004-00
<b>Duration</b>	1/95-1/00
<b>Geographic Scope</b>	Worldwide

**Purpose:** To expand the development of national family planning/reproductive health (FP/RH) programs; to increase access to and use of quality FP/RH services in currently underserved populations; and to ensure that unmet demand for these services is addressed through the provision of appropriate financial, technical, and human resources.

**Description:** The SEATS project focuses on developing and strengthening national FP/RH service delivery programs in selected countries in Africa, Asia, the Near East, and the Newly Independent States. SEATS has three overall program emphases: 1) implementation of FP and RH service delivery programs; 2) development of innovative approaches to large-scale FP/RH program expansion; and 3) strategic planning, program design, and management support for national FP programs. Two key technical focus areas of SEATS II are quality of care and sustainability. The project has launched five special initiatives: Midwifery Association Partnerships for Sustainability (MAPS); Youth; Women's Literacy and Reproductive Health; Maximizing Urban Resources; and Integration of FP into NGO/PVO programs.

Technical staff are based in regional offices, country offices, and John Snow's Washington, D.C. office. SEATS provides assistance in program planning and management, IEC, training, commodity distribution, and management information systems.

**Subcontractors:** AVSC International; American College of Nurse Midwives (ACNM); Initiatives, Inc.; Planned Parenthood Federation of America/Family Planning International Assistance (PPFA); Program for Appropriate Technology in Health (PATH); and World Education, Inc. (WEI).

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# Family Planning Services (Pathfinder)

<b>Cooperating Agency</b>	Pathfinder International
<b>Project Number</b>	936-3062
<b>Agreement Number</b>	CCP-A-00-92-00025-00
<b>Duration</b>	9/92-9/00
<b>Geographic Scope</b>	Worldwide

**Purpose:** To introduce voluntary and quality family planning and other reproductive health services, information, and training in developing countries and to make existing family planning service systems more effective in both public and private sectors.

**Description:** Pathfinder International is a non-profit organization headquartered in Boston and founded in 1957 to initiate and encourage family planning programs and activities throughout the developing world. Since USAID funding began in 1967, Pathfinder International has sponsored over 2,400 projects in 85 countries and has helped encourage the establishment of national family planning associations in several Asian and African countries. Under this cooperative agreement, Pathfinder provides a range of different services that complement USAID field mission programs in 22 countries. Pathfinder provides local subgrantees with administrative and financial support, various forms of technical assistance, training, upgrading of facilities, and commodities. Pathfinder works broadly in a number of program areas, including community-based distribution programs, clinical services, information and education, institutional development, contraceptive social marketing, and services for young adults. Country activities are designed to support accomplishment of USAID strategic objectives in the PHN sector.

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# FOCUS on Young Adults

<b>Cooperating Agency</b>	Pathfinder International
<b>Project Number</b>	936-3073
<b>Agreement Number</b>	CCP-A-00-96-90002-00
<b>Duration</b>	11/95-11/00
<b>Geographic Scope</b>	Worldwide

**Purpose:** To improve the health and well-being of young adults through identifying effective adolescent initiatives in developing countries. FOCUS addresses priority issues in young adult reproductive health (YARH), and promotes positive health-related behaviors, access to appropriate information and services, and enhanced public and private sector capabilities.

**Description:** FOCUS is a PHN Center project. In collaboration with donors and other organizations, FOCUS improves knowledge regarding the conditions and requirements for effective young adult reproductive health programs; disseminates information about past and present initiatives to improve YARH around the world; serves as a technical resource in YARH policy development and as a catalyst for policy changes that promote YARH; and identifies effective training approaches for young people, service providers, policymakers, and program managers. Key objectives are to:

- Increase awareness about both the reproductive health needs of young adults and successful initiatives to serve them;
- Improve the capability of organizations to design and implement youth initiatives through training, suggesting effective methods of program design, policy analysis, and service delivery and;
- Identify what works by collaborating with organizations to document past experience, and to evaluate and undertake practical research on promising programs and policies.

FOCUS works in a limited number of countries, selected on the basis of their potential role in identifying, demonstrating, and evaluating successful approaches to meeting the reproductive health needs of young adults. Drawing on its experience in these countries, FOCUS is helping to develop effective strategies and recommendations for responding to YARH needs worldwide.

**Subcontractors:** The Futures Group International; Tulane University School of Public Health and Tropical Medicine.

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# International Planned Parenthood Federation (IPPF/London)

<b>Cooperating Agency</b>	International Planned Parenthood Federation/London
<b>Project Number</b>	936-3071
<b>Agreement Number</b>	CCP-G-00-93-00013-00
<b>Duration</b>	8/93-8/01
<b>Geographic Scope</b>	Worldwide

**Purpose:** The purpose of this grant is to enable the International Planned Parenthood Federation (IPPF) to introduce, expand, and improve family planning and reproductive health information and services through its extensive affiliated network of indigenous family planning associations.

**Description:** IPPF is the largest non-profit, non-governmental family planning and reproductive health organization in the world. IPPF is an international federation of 146 autonomous local Family Planning Associations (FPAs) working primarily among disadvantaged urban and rural populations which are marginalized from existing health service delivery systems. USAID grant funds are used to increase the strength and effectiveness of IPPF FPAs in introducing and expanding programs that address the goals articulated in the IPPF strategic plan, VISION 2000. Programmatic emphases under VISION 2000 include: 1) safeguarding the individual's right to free and informed choices in reproductive health; 2) removing political, legal, and administrative barriers to the provision of reproductive health care services; 3) working for the establishment of equal rights for women to make their own reproductive health choices; 4) eliminating the high incidence of unsafe abortion; 5) increasing men's commitment and joint responsibility in all areas of reproductive health; and 6) increasing the access of young people to appropriate information, education, and services in addressing their needs for reproductive health care. The USAID contributions also enable FPAs to improve their management and evaluation capabilities.

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# IPPF Endowments

<b>Cooperating Agency</b>	International Planned Parenthood Federation/ Western Hemisphere Region
<b>Project Number</b>	N/A
<b>Grant Number</b>	N/A
<b>Duration</b>	N/A
<b>Geographic Scope</b>	Western Hemisphere Region

G/PHN/POP developed two endowments under The Transition Project (1992-1997) to support the Colombia IPPF affiliate, PROFAMILIA, and to support sustainability efforts of the affiliates in the Western Hemisphere Region.

## **PROFAMILIA Endowment:**

**Purpose:** To maintain reproductive health service facilities and respond to health needs of displaced populations and other emergencies. The Colombia IPPF Affiliate, PROFAMILIA, received a \$6 million dollar endowment upon phase-out of USAID assistance to the country.

**Description:** The endowment allows PROFAMILIA to draw on income generated to fund hard-to-reach populations and to meet emergencies. The endowment is managed by Brown Brothers and Harriman in New York and has grown to \$10 million by the end of 1998.

LAC Endowment for Sustainability:

**Purpose:** to create a revolving loan fund to support income generating activities of the IPPF/WHR affiliates in Latin America and the Caribbean.

**Description:** The endowment provides loans of up to \$300,000 per affiliate for sustainable activities. Initially available to regional IPPF affiliates, this mechanism may be extended to other non-governmental organizations in LAC. IPPF/WHR received \$4 million from USAID and is contributing another \$1 million over a five-year period. This endowment is managed by U.S. Trust of New York.

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# Linkages: Breastfeeding and LAM, and Related Maternal and Young Child Nutrition

<b>Cooperating Agency</b>	Academy for Educational Development (AED)
<b>Project Number</b>	936-3082.01
<b>Agreement Number</b>	HRN-A-00-97-00007-00
<b>Duration</b>	11/96-10/01
<b>Geographic Scope</b>	Worldwide

**Purpose:** Linkages is the principal USAID initiative for improving breastfeeding (BF), Lactational Amenorrhea Method (LAM), and related maternal and child dietary practices. The focus of the program is on mainstreaming BF, LAM, and related complementary feeding and maternal dietary practices into ongoing Child Survival (CS), Maternal and Child Health (MCH), Family Planning (FP) and Emergency Relief Programs.

**Description:** Principal activities include: 1) technical support to help CAs, PVOs, public sector programs, and other donors improve their BF, LAM, and related infant feeding and maternal nutrition activities; and focusing on mainstreaming these activities at all levels of service delivery, IEC, curricula, and monitoring and evaluation tools in MCH and FP programming; 2) development and testing of community-based strategies, peer counseling and other models, while linking to ongoing efforts in Baby-Friendly Hospital Initiatives (BFHI) and Integrated Management of Childhood Illness (IMCI); 3) interventions in cooperation with large PVO networks and scaling up proven strategies and technologies; 4) private sector initiatives exploring the commercial sector networks; and 5) program-driven research such as operations research, cost-effectiveness, and country program assessments, with in-depth cross-site analysis and smaller focused studies of intervention components.

**Partners:** La Leche League International; Population Services International (PSI); and Wellstart International.

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# Population and Family Planning Expansion (CARE)

<b>Cooperating Agency</b>	Cooperative for Assistance and Relief Everywhere (CARE)
<b>Project Number</b>	936-3058
<b>Agreement Number</b>	DPE-A-00-91-00011-00
<b>Duration</b>	5/91-6/99
<b>Geographic Scope</b>	Worldwide

**Purpose:** To lower fertility by increasing the availability and use of voluntary family planning services.

**Description:** CARE, the largest private, non-sectarian development and relief agency in the world, has made population a priority. CARE is adding family planning to their ongoing worldwide, multisectoral development program. With USAID assistance, CARE is developing the technical resources and systems necessary to integrate family planning services into their programs through development of partnerships with government and non-governmental organizations. CARE is testing new approaches to providing family planning information, services, and supplies to rural and other hard-to-reach populations. CARE provides matching funds with its ten CARE international members and other donors to increase resources available.

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# Program for Voluntary Surgical Contraception and Related Services

<b>Cooperating Agency</b>	AVSC International
<b>Project Number</b>	936-3068
<b>Agreement Number</b>	HRN-A-00-98-00042-00
<b>Duration</b>	9/98-8/03
<b>Geographic Scope</b>	Worldwide

**Purpose:** to support family planning activities with a primary focus on providing global leadership in voluntary sterilization, other long-term methods (NORPLANT®, IUDs) and post-abortion care, as well as increasing the availability and use of hospital and clinic-based family planning services.

**Description:** AVSC works around the world to make safe and voluntary surgical contraception a known and accessible choice, among other family planning choices, for both women and men. AVSC's work emphasizes high-quality, client-centered service delivery of female sterilization, vasectomy, and other family planning methods. AVSC's technical assistance and training programs focus on counseling and informed choice, medical safety, low-tech infection prevention practices, and quality in service delivery from the perspective of the client. AVSC's field and technical staff work in partnership with country counterparts, USAID missions, other major donors, and cooperating agencies to establish, expand, and improve sustainable clinical contraception and related services. AVSC provides technical and other assistance to countries and donors in the following areas: conducting needs assessments and planning for clinical contraception service delivery; managing effective client-centered service delivery systems; conducting service-based training; developing service guidelines and quality assurance systems; establishing client counseling and information and education services; introducing contraceptive technologies; determining medical equipment/supply needs; providing training in postabortion care; doing service-based programmatic research; and evaluating the impact of programs and activities.

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# PVO/NGO Networks CARE MoRR

<b>Cooperating Agency</b>	Cooperative for Assistance and Relief Everywhere (CARE)
<b>Project Number</b>	936-3084.02
<b>Agreement Number</b>	HRN-A-00-98-00023-00
<b>Duration</b>	7/98-7/01
<b>Geographic Scope</b>	Worldwide

**Purpose:** To contribute to household and health security by empowering people to achieve their reproductive intentions and reproductive health.

**Description:** CARE-MoRR (Management of Reproductive Risk) is designed to empower communities to be organized, effective consumers of and advocates for family planning/reproductive health/child survival/HIV-AIDS services; to increase the capacity of a wide range of national institutions (public sector, NGOs, community-based organizations, and private, for-profit) and small and moderate international PVOs to deliver appropriate, high quality, family planning and reproductive health services; and to significantly increase the sustainability of CARE's family planning and reproductive health program

To achieve these ends, CARE will build service delivery networks. Based on a careful analysis of reproductive health needs and the strengths and weaknesses of local institutions, CARE will construct a service delivery network of private voluntary organizations, non-governmental organizations, public sector providers, community-based organizations and for-profit providers. CARE will work closely with the network to strengthen their capacity to delivery an integrated package of family planning and other reproductive health services including maternal health, newborn care, and STD/HIV prevention activities.

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# PVO/NGO Networks ENABLE

<b>Cooperating Agency</b>	The Centre for Development and Population Activities (CEDPA)
<b>Project Number</b>	936-3084.03
<b>Agreement Number</b>	HRN-A-00-98-00009-00
<b>Duration</b>	2/98-2/01
<b>Geographic Scope</b>	Worldwide

**Purpose:** To strengthen women's capabilities for informed and autonomous decision-making to prevent unintended pregnancies and improve reproductive health.

**Description:** CEDPA's mission is to empower women at all levels of society to be full partners in development. CEDPA has a global network of alumni and partners working in population and development sectors in 139 countries. The organization has broad experience in the delivery of community-based family planning/reproductive health services and in capacity building of NGOs. CEDPA's ENABLE project will work with approximately 50 NGO partners to expand quality services, create behavior change, and increase women's FP/RH decision-making ability. An integrated package of family planning and other reproductive health services will be offered by NGOs. These community-based programs will expand access to women-centered, gender sensitive family planning and STI/HIV prevention services. The community-based approach will be extended to broaden the range of services to women and children under five to improve maternal and child health. ENABLE will build on lessons learned from the ACCESS project.

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# PVO/NGO Networks NGO Networks for Health

<b>Cooperating Agency</b>	Save the Children
<b>Project Number</b>	936-3084.01
<b>Agreement Number</b>	HRN-A-00-98-00011-00
<b>Duration</b>	3/98-3/03
<b>Geographic Scope</b>	Worldwide

**Purpose:** To increase the use of family planning/reproductive health/child survival/HIV services through enhanced capacities of PVO/NGO networks.

**Description:** A coalition of four private voluntary organizations and one technical agency are combining efforts to build and strengthen the capacities of PVO/NGO networks in developing countries to provide family planning, reproductive health, child survival, maternal health and RTI/HIV services. Network's efforts will focus on expanding access to, and improving the quality of, family planning as part of community-based efforts to improve maternal and child health, and preventing the transmission of HIV/AIDS and other sexually transmitted infections. The project will work in about four to six countries, with the potential to expand to additional countries through the partner organizations' existing programs.

**Partners:** Led by Save the Children, the group includes the Cooperative for Assistance and Relief Everywhere (CARE); the Adventist Development and Relief Agency (ADRA); Childreach/Plan International; and the Program for Appropriate Technology in Health (PATH).

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## Expert Studies of Population Issues

<b>Cooperating Agency</b>	National Academy of Sciences (NAS)
<b>Project Number</b>	936-3078
<b>Agreement Number</b>	CCP-A-00-95-00024-00
<b>Duration</b>	9/95-9/00
<b>Geographic Scope</b>	Worldwide

**Purpose:** To support the National Academy of Sciences' Committee on Population in conducting research on population issues of special interest to the international population community.

**Description:** The Committee organizes panel studies, conferences, workshops, and meetings designed to synthesize and elicit research on issues in population, reproductive health, and family planning that will confront USAID and its development partners in the next decades.

The Committee's agenda is formulated on a continuing basis at its meetings, and between meetings in staff discussions with sponsoring agencies. Proposed topics include: population projections, maternal mortality and urban population dynamics.

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# MEASURE: BUCEN Survey and Census Information, Leadership, and Self-Sufficiency (BUCEN-SCILS)

Cooperating Agency	U.S. Bureau of the Census (BUCEN)
Project Number	936-3083.04
Agreement Number	HRN-P-00-97-00016-00
Duration	9/97-9/02
Geographic Scope	Worldwide

**Purpose:** Within the context of MEASURE's coordinated effort to collect data, improve monitoring and evaluation, and disseminate information on population, health and nutrition, BUCEN-SCILS seeks to develop more cost-effective and efficient approaches to strengthen the capability of developing countries to collect, analyze, disseminate, and use population information for designing, implementing and evaluating policies and programs and raising awareness among national leaders of population structure and growth and their impact on development.

**Description:** The PASA with BUCEN has two main components: a) country-specific technical assistance and training for the implementation of censuses and other surveys and b) centrally coordinated analysis, compilation, publication and dissemination of demographic data; regional and international training; and development of software, methodologies, case studies, and training materials for worldwide use.

Technical support activities for implementing censuses and other surveys at the country level include: technical consultations and workshops for USAID field missions and host country statistical agencies, and training in census management procedures, data collection and processing, demographic data analysis, dissemination, and use of census data.

Centrally developed software, methodologies and training materials for collecting and analyzing census and survey results are used for in-country technical assistance and disseminated widely. BUCEN provides ongoing support for users of its software and methodologies through ad hoc support, and in-country and international training courses.

BUCEN has developed and maintains a comprehensive worldwide demographic database. This resource is used for a) ad hoc requests from USAID/Washington, field missions and others; b) preparation of special reports; c) publication of *Population Trends*, reports on specific countries; and d) compilation of the *World Population Profile*, a biennial report of worldwide population statistics.

BUCEN also plays a lead role in improving coordination of country activities and technical innovation among donors and others at the local, regional and international levels.

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# MEASURE *CDC*

<b>Cooperating Agency</b>	Centers for Disease Control and Prevention (CDC)
<b>Project Number</b>	936-3038.01
<b>Agreement Number</b>	HRN-P-00-97-00014-00
<b>Duration</b>	10/97-9/02
<b>Geographic Scope</b>	Worldwide

**Purpose:** Within the context of MEASURE's coordinated effort to collect data, improve monitoring and evaluation, and disseminate information on population, health and nutrition, MEASURE *CDC* seeks to improve the quality and availability of appropriate data on reproductive health status and services, and to enhance the ability of local organizations to collect, analyze and disseminate such information.

**Description:** With its work in Reproductive Health Surveys, MEASURE *CDC* represents the fifth component of the MEASURE Results Package. Each CDC survey is tailored to meet the needs of the country and reproductive health program where it is being conducted, and works to improve information about health and fertility. Special modules can be added to answer questions specific to a given country or program such as modules on young adults, domestic violence, children's school attendance, HIV/AIDS, nutrition and sterilization.

CDC provides technical assistance with four types of surveys: Reproductive Health Surveys, Male Reproductive Health Surveys, Young Adult Reproductive Health Surveys and Reproductive Health Program Evaluation Surveys. Technical assistance is provided in designing and carrying out surveys relevant to each setting, in collaboration with local host country organizations. CDC places a high priority on training local counterparts in all aspects of survey design and implementation.

For a complete description of other activities conducted under the CDC PASA, see the FPLM/CDC project description on page 13.

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# MEASURE *Communication*

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<b>Project Number</b>	936-3083.03
<b>Agreement Number</b>	HRN-A-00-98-00001-00
<b>Duration</b>	10/97-9/02
<b>Geographic Scope</b>	Worldwide

**Purpose:** Within the context of MEASURE's coordinated effort to collect data, improve monitoring and evaluation, and disseminate information on population, health and nutrition, MEASURE *Communication* seeks to promote wider dissemination and increased use of information on population, health, and nutrition; and to strengthen capabilities of host-country and regional institutions to communicate results of data analysis and research to key audiences.

**Description:** MEASURE *Communication* provides information needs assessments, technical assistance and training, and produces materials for program and policy audiences on key issues in population, health, and nutrition. MEASURE *Communication* emphasizes dissemination of results from data collection, analysis, and monitoring and evaluation carried out under the MEASURE Results Package. Data and results from other USAID-supported projects and other sources are also communicated to meet information needs of program managers and policy makers.

Activities include:

- Working with host-country institutions, USAID Missions, media organizations, the private sector, and other CAs to plan and implement dissemination strategies for optimal use;
- Building capacity of host-country institutions to communicate information and research results effectively, through in-country, regional, and global training and technical assistance;
- Assessing information needs and maintaining feedback from global and country-specific audiences to evaluate the relevance and impact of data, research and evaluation findings; and
- Producing and disseminating global and country specific materials (print, electronic, and other formats) and synthesizing results of data analyses, in-depth research, and evaluation.

**Subcontractor:** Academy for Educational Development (AED).

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# MEASURE *DHS+*

<b>Cooperating Agency</b>	Macro International, Inc.
<b>Project Number</b>	936-3083.01
<b>Contract Number</b>	HRN-C-00-97-00019-00
<b>Duration</b>	10/97-9/02
<b>Geographic Scope</b>	Worldwide

**Purpose:** Within the context of MEASURE's coordinated effort to collect data, improve monitoring and evaluation, and disseminate information on population, health and nutrition, MEASURE *DHS+* seeks to improve information through appropriate data collection, analysis, and evaluation; and to strengthen the data collection and utilization capabilities of host-country institutions.

**Description:** MEASURE *DHS+* continues USAID's involvement in global data collection with an increased focus on country data needs and on utilization of data for evaluation and monitoring purposes. MEASURE *DHS+* emphasizes both qualitative and quantitative data collection methods and includes nonsurvey data collection approaches such as information systems and service statistics. The project is also more flexible than previous data collection initiatives in terms of content and geographic coverage.

The DHS Core Questionnaire has been modified to include the following information: a five-year monthly calendar of all pregnancies, quality of care, postnatal care, vitamin A intake, sanitation practices, decision making about children's and women's health, and anemia testing for all children and women of reproductive age. The surveys also include an expanded set of questions on HIV/AIDS and STIs. New modules have been added on such topics as malaria, health expenditures, women's empowerment, and domestic violence. MEASURE *DHS+* also collects information on the service environment through facility surveys that may be organized independently or in conjunction with the main survey.

Other activities of MEASURE *DHS+* include:

- Developing long-term cost-effective data collection plans;
- Strengthening in-country capacity to collect and utilize data through short-term training activities, on-the-job skills transfer, formal workshops at the country or regional level, providing assistance with formal training courses in host country institutions, and web-based training sessions;
- Assisting countries to efficiently utilize data sources other than national level surveys, such as management and health information systems, censuses, sentinel surveillance, sample registration systems, and international and local databases;

**Subcontractors:** Population Council and The East West Center.

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# MEASURE *Evaluation*

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<b>Project Number</b>	936-3083.02
<b>Agreement Number</b>	HRN-A-00-97-00018-00
<b>Duration</b>	9/97-9/02
<b>Geographic Scope</b>	Worldwide

**Purpose:** Within the context of MEASURE's coordinated effort to collect data, improve monitoring and evaluation, and disseminate information on population, health and nutrition, MEASURE *Evaluation* seeks to improve monitoring and evaluation coordination/partnerships at international, USAID, cooperating agency and country levels; to strengthen the monitoring and evaluation capabilities in host-country institutions; and to improve monitoring and evaluation tools and methodologies.

**Description:** The MEASURE *Evaluation* cooperative agreement emphasizes monitoring and evaluation assistance to host-country population, health and nutrition programs as well as to other Cooperating Agencies, International Donors, USAID Missions and USAID/Washington. MEASURE *Evaluation* replaces the Evaluation of Family Planning Program Impact (EVALUATION) Project, but expands upon it to include monitoring and evaluation of the full range of population, health and nutrition programs.

Specific activities of MEASURE *Evaluation* include the following:

- Coordinating the development of comprehensive monitoring and evaluation strategies for interested host-country PHN programs while developing in-country capacity and capabilities;
- Conducting monitoring and evaluation working groups for indicator and tool development;
- Conducting in-country and U.S.-based training in monitoring and evaluation;
- Supporting qualified candidates for master's degree training in monitoring and evaluation at three regional universities (the University of Costa Rica, Mahidol University, and the University of Pretoria);
- Using web-based distance learning models for monitoring and evaluation skill building; and
- Developing strengthened monitoring and evaluation methods that are useful for monitoring program progress on an annual or biannual basis, such as health information systems, sentinel surveillance, facility diagnostic assessments, and qualitative studies.

**Subcontractors:** John Snow Research and Training Institute; Macro International, Inc.; and Tulane University.

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# The POLICY Project

<b>Cooperating Agency</b>	The Futures Group International
<b>Project Number</b>	936-3078
<b>Contract Number</b>	CCP-C-00-95-00023-00
<b>Duration</b>	9/95-8/00
<b>Geographic Scope</b>	Worldwide

**Purpose:** To help build a supportive policy environment for family planning and reproductive health programs through promotion of a participatory policy process and the development and implementation of population policies that are effective in responding to client needs.

**Description:** The POLICY Project, the centerpiece of G/PHN's population policy portfolio, offers policy assistance for an array of reproductive health issues, particularly family planning and HIV/AIDS. Assistance is available in four areas: 1) increased and improved policy dialogue and formulation; 2) a democratized policy process; 3) improved national strategic planning and resource allocation; and 4) policy-relevant research and dissemination. The project also provides computer software and technical assistance in the use of the SPECTRUM models (RAPID, AIDS Impact Model (AIM), DemProj, and FamPlan).

Special attention is given to seven crosscutting themes: reproductive health (including HIV/AIDS and maternal health), intersectoral linkages, gender issues, participation, dissemination, partnerships, and results. In pursuit of these outcomes, POLICY provides technical assistance, training, and equipment. The project supports long-term advisors, short- and long-term training, regional and national workshops, commissioned research, observational travel, a small grants program to expand the capacity of local NGOs/PVOs to participate effectively in the policy process, and South-to-South interaction.

**Subcontractors:** Research Triangle Institute (RTI) and The Centre for Development and Population Activities (CEDPA).

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# Contraceptive Research and Development (CONRAD III)

<b>Cooperating Agency</b>	Eastern Virginia Medical School (EVMS)
<b>Project Number</b>	936-3095
<b>Agreement Number</b>	HRN-A-00-98-00020-00
<b>Duration</b>	8/98-8/03
<b>Geographic Scope</b>	Worldwide

**Purpose:** To develop and improve new methods of family planning and other reproductive health technologies for use in developing countries, with a particular emphasis on products designed to prevent pregnancy and the transmission of sexually transmitted infections (STI), including HIV/AIDS.

**Description:** The primary focus of the CONRAD program is on the early stages of contraceptive research and development, beginning with targeted or applied research studies and progressing through the first two phases of clinical testing in humans. The program supports subprojects conducted by scientists worldwide, as well as laboratory and clinical research conducted at the Jones Institute for Reproductive Medicine, EVMS. Areas of research that have been given highest priority for the development of better, safer and more acceptable reproductive health technologies include, but are not limited to:

1. Woman-controlled products that offer protection from both unplanned pregnancy and from STI/HIV;
2. New barrier methods for women;
3. Long-acting injectable and implantable contraceptives for women and men; and
4. Non surgical and/or reversible sterilization techniques.

CONRAD III supports research on the mechanisms and control of heterosexual transmission of HIV, and on the effect of contraceptive use on heterosexual transmission of HIV and other STIs. CONRAD III sponsors international workshops and technical meetings which bring together collaborating scientists and other leading experts to focus research efforts and disseminate technical information.

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# Contraceptive Technology Research (CTR)

<b>Cooperating Agency</b>	Family Health International (FHI)
<b>Project Number</b>	936-3079
<b>Agreement Number</b>	CCP-A-00-95-00022-00
<b>Duration</b>	9/95-8/00
<b>Geographic Scope</b>	Worldwide

**Purpose:** To develop, evaluate, and introduce a range of safe, effective, and acceptable contraceptive methods and reproductive health technologies to enhance the capacity of family planning and reproductive health researchers and programs in developing countries to evaluate and provide these technologies.

**Description:** The project includes the following activities: 1) developing new contraceptive methods and reproductive health technologies, and providing the documentation for regulatory approval; 2) conducting clinical trials and epidemiologic studies to evaluate the safety and efficacy of various contraceptive methods, as well as other reproductive health technologies, under different conditions; 3) assessing the acceptability and impact on users and programs of various contraceptive methods and reproductive health technologies; 4) carrying out surveillance and testing of contraceptive commodities to ensure product quality; 5) training overseas clinicians in contraceptive and other reproductive health technologies; and 6) collecting, analyzing, and disseminating research findings.

Priority areas are: development of new and improved barrier methods and spermicides for pregnancy and HIV-AIDS/STD prevention; improving contraceptive quality; assessing contraceptive benefits and risks; improving access to contraception through reduction of medical barriers; improving cost-effectiveness of programs; and introducing new or underutilized methods, such as DMPA.

This project has documented the comparative safety, efficacy, and acceptability in different developing country settings of methods such as minilap and laparoscopic sterilization, NORPLANT®, copper IUDs, low-dose oral contraceptives, post-partum IUDs, and various barrier contraceptives, including condoms. Work under this project supported the application to the FDA for marketing approval of the Reality® female condom and the Filshie Clip. An application for a thermoplastic male condom is pending FDA approval.

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# Maximizing Access and Quality (MAQ) Initiative

Cooperating Agency	Multiple
Project Number	N/A
Agreement Number	N/A
Duration	Ongoing
Geographic Scope	Worldwide

**Purpose:** To provide technical assistance to USAID mission supported programs through the CA community and other mechanisms, and to identify and implement practical, cost-effective, and actionable interventions aimed at improving both the access to and quality of family planning and selected reproductive health services.

**Description:** The MAQ Working Group includes a consortium of international experts and implementing agencies. It consists of five subcommittees, each focusing on a different quality and access issue: Technical Guidance and Competence, Client-Provider Interaction, Policy, Advocacy, Communication and Education, Management and Supervision, and Monitoring and Evaluation. Through these subcommittees, experts pool their knowledge and field experience to identify and promote state-of-the art technical guidance, tools and concepts. Specific examples of tools currently available or in the process of being developed include:

- The “MAQ Exchange”, a traveling, facilitative workshop that provides a mechanism of exchange for USAID/W, USAID missions, Ministry of Health staff and other partners to optimize the access to and quality of family planning and selected reproductive health services through improved application of MAQ principles and practices;
- *Improving Access to Quality Care in Family Planning: Medical Eligibility Criteria for Contraceptive Use*, World Health Organization, 1996;
- *Essentials of Contraceptive Technology*, Johns Hopkins Population Information, 1997.
- A short-list of quality indicators and application guidelines;
- *Recommendations for Updating Selected Practices in Contraceptive Use*, Volumes I & II, TG/C Subcommittee, 1994 & 1997;
- *Client Provider Interactions in Family Planning Services: Guidance from Research and Program Experience*, CPI Subcommittee, 1997; and
- *The MAQ Checklist*, PACE Subcommittee, 1998.

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# Natural Family Planning & Reproductive Health Awareness (The AWARENESS Project)

<b>Cooperating Agency</b>	Georgetown University/ Institute for Reproductive Health (GU/IRH)
<b>Project Number</b>	936-3088
<b>Agreement Number</b>	HRN-A-00-97-00011-00
<b>Duration</b>	7/97-6/02
<b>Geographic Scope</b>	Worldwide

**Purpose:** To improve and expand Natural Family Planning services (NFP), develop new strategies and approaches to increase Reproductive Health Awareness (RHA) in developing countries; and to improve the policy environment of host country PHN programs.

**Description:** The objective of the NFP/RHA program is to improve and expand natural family planning services and develop new strategies and approaches to increase reproductive health awareness of individuals and communities in developing countries. The NFP/RHA activity will address the needs of people who are using a natural method to avoid pregnancy but lack the information and skills to do so effectively, as well as those who would choose a natural method if it were available to them.

The NFP/RHA program will expand natural family planning services and improve reproductive health through a cooperative agreement with Georgetown University/Institute of Reproductive Health (GU/IRH). NFP/RHA contains the following elements:

- mainstreaming natural family planning into existing family planning programs, where appropriate;
- increasing reproductive health awareness among communities;
- placing emphasis on the costs and cost-effectiveness of NFP and RHA services; and
- placing emphasis on capacity-building of public- and private-sector institutions to provide natural family planning services and raise reproductive health awareness.

The program also focuses on empowering women and men to participate in their own reproductive health care and decision-making through disease prevention; early recognition, self-referral, and treatment of disease; and, active, informed decision-making on their own behalf.

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# The Population Council Program (POP Council)

<b>Cooperating Agency</b>	Population Council
<b>Project Number</b>	936-3050
<b>Agreement Number</b>	CCP-A-00-94-00013-00
<b>Duration</b>	9/94-9/99
<b>Geographic Scope</b>	Worldwide

**Purpose:** To develop, evaluate, gain regulatory approval of, and appropriately introduce contraceptive technology; to expand contraceptive choice in family planning programs; to provide technical information on contraceptive methods to the international population and family planning community; and to provide technical assistance to institutions in developing countries for research, evaluation, training, and limited work on policy research and service delivery systems.

**Description:** Research in the contraceptive development area has resulted in the U.S. Food and Drug Administration's approval of a new two-rod levonorgestrel implant contraceptive. Current research is focused on the development of hormone-releasing vaginal rings, second generation subdermal implants, transdermal contraception for women, and long-acting reversible methods for male contraception. The Council's efforts in contraceptive introduction are aimed at expanding contraceptive choice by broadening the range and availability of contraceptive options for women and men. Through a combined program of field-based research, technical assistance and policy dialogue, the Council's work addresses those issues that impact on the quality of care as contraceptive methods are incorporated into family planning programs. In addition, research and technical assistance support such areas as the development of assessment tools for examining specific issues surrounding adolescent reproductive outcomes.

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# Population Technical Assistance (POPTECH)

<b>Cooperating Agency</b>	Basic Health Management, International (BHM)
<b>Project Number</b>	936-3024
<b>Contract Number</b>	CCP-C-00-93-00011-00
<b>Duration</b>	12/93-11/99
<b>Geographic Scope</b>	Worldwide

**Purpose:** To improve the effectiveness of the design, implementation, management, and evaluation of USAID-funded family planning and population programs worldwide by providing technical assistance.

**Description:** The project provides professional short-term consultants in response to specific requests for technical assistance from missions and USAID/W in a broad spectrum of disciplines including demography, population policy, maternal and child health care, information, education and communication (IEC), fiscal management, medical science, training, administration, evaluation, logistics and other areas of family planning services delivery. Requests for assistance cover areas such as project design and evaluation, strategic planning and development of results packages.

In addition to providing short-term consultants for technical assistance, the POPTECH project also serves as a technical resource for USAID in the planning and scheduling of technical assistance activities. Project staff work closely with USAID to develop and refine Statements of Work; orient consultants; disseminate findings and lessons learned; and edit, clear, and distribute draft and final reports.

**Special Restrictions:** The current POPTECH contract with BHM will expire in several months and is unable to undertake new assignments due to LOE and budget limitations. A new contract was awarded in September, but is currently under protest and a stop-work order is in effect. Missions will be notified as soon as the situation is resolved. In the interim, one option for missions to consider is one of CDIE's IQCs. Please contact the POPTECH CTO if you would like the list emailed to you.

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# Reproductive Health Operations Research (FRONTIERS)

<b>Cooperating Agency</b>	Population Council
<b>Project Number</b>	936-3086
<b>Agreement Number</b>	HRN-A-00-98-00012-00
<b>Duration</b>	6/98-6/03
<b>Geographic Scope</b>	Worldwide

**Purpose:** To contribute to the achievement of the PHN Center strategic objectives by improving the quality, accessibility, and cost-effectiveness of family planning and other reproductive health services through operations research and technical assistance. FRONTIERS will conduct research on issues of both national and global importance. It will also build the capacity of developing country organizations to use operations research as a management tool to diagnose and solve service delivery problems.

**Description:** Operations research provides the empirical base for making decisions on how best to improve family planning and other reproductive health programs. FRONTIERS is the centerpiece of G/PHN's FP/RH service delivery research portfolio. The cooperative agreement consolidates previous regional work into one global project. FRONTIERS will test innovative solutions to service delivery problems, assure dissemination and utilization of results, and build OR capacity. Multi-country studies on issues of global importance, such as serving youth, integration of services, improving quality of care, and financing are a major focus of the program. Other key components include country and regional studies, capacity building, a small grants program, a focus on research utilization, and partnerships with a wide range of cooperating agencies and other organizations.

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# Population Program Activities Support (PPAS) Support Services Contract

<b>Cooperating Agency</b>	PaL-Tech, Inc.
<b>Project Number</b>	936-3070
<b>Contract Number</b>	HRN-C-00-98-00008-00
<b>Duration</b>	7/98-7/03
<b>Geographic Scope</b>	USAID/Washington

**Purpose:** To provide administrative, programmatic and logistic support services to the Center for Population, Health and Nutrition, Global Bureau (G/PHN).

**Description:** PaL-Tech, Inc. provides administrative and project support services to the Center for Population Health and Nutrition in the Global Bureau (G/PHN), thus, contributing to the achievement of PHN and Agency goals and objectives. The three offices within the PHN Center have complementary objectives and activities: the Office of Population (G/PHN/POP), the Office of Health and Nutrition (G/PHN/HN) and the Office of Field and Program Support (G/PHN/OFPS). This contract requires the contractor to provide administrative and program support to PHNC staff from an off-site location. Support needs will be driven by quantitative and qualitative performance measures, goals and objectives of PHNC, activities carried out in support of the Agency's PHN programs, and routine assessments of support operations.

**Special Restrictions:** This project cannot take Field Support Funds.

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# ARIVAC

## Acute Respiratory Infections Vaccine Project

<b>Cooperating Agency</b>	Program for Appropriate Technology in Health (PATH)
<b>Project Number</b>	936-6000.04
<b>Agreement Number</b>	HRN-A-00-95-00025-00
<b>Duration</b>	9/95-9/00
<b>Geographic Scope</b>	Worldwide

**Purpose:** To facilitate the incorporation of promising new and improved vaccines against acute respiratory infections into the childhood immunization programs of developing countries. The project is part of USAID's Children's Vaccine Program.

**Description:** The overall objective of the project is to evaluate the impact and cost-effectiveness of introducing ARI vaccines into EPI programs in developing countries. Initially the project is focusing on Haemophilus Influenzae type b (Hib) vaccine, a vaccine whose introduction in America and Europe has led to the virtual elimination of meningitis among children.

Through a process of criteria definition and prioritization, the island of Lombok in Indonesia was selected for the first study. That study is now underway in a three-way collaboration among PATH, the Association Pour l'Aide a la Medicine Preventive (AMP) in France, and the Indonesian Ministry of Health. The specific goal of the study is to analyze the impact of Hib on the incidence of pneumonia among a population of 24,000 children, using the Hib vaccine as a probe. A carriage study has already been conducted that demonstrated the presence of Hib in this population, and surveillance and referral systems in 50 study villages have been set up. The vaccine introduction phase of the study will take two years, starting in the Fall of 1998, using a vaccine from a donation to UNICEF.

The results of the study in Indonesia will assist the government in determining the appropriateness and cost/benefits of adopting the Hib vaccine into regular EPI schedules. These results should also be of interest to other developing country governments, especially in Asia. The systems are also in place on Lombok to pursue similar studies of other ARI vaccines.

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# Basic Support for Institutionalizing Child Survival (BASICS)

<b>Cooperating Agency</b>	The Partnership for Child Health Care, Inc., (a joint venture of AED, JSI, MSH)
<b>Project Number</b>	936-6006.01
<b>Contract Number</b>	HRN-C-00-93-00031-00 HRN-Q-00-93-00032-00
<b>Duration</b>	9/93-6/99
<b>Geographic Scope</b>	Worldwide

**Purpose:** To continue and sustain reductions in morbidity and mortality among infants and children in developing countries by increasing and institutionalizing the effective, efficient, and sustainable delivery of Expanded Programs for Immunization (EPI), Control of Diarrheal Diseases (CDC), Acute Respiratory Infection (ARI), malaria, and other Child Survival services.

**Description:** This contract is designed to assist USAID missions, regional bureaus, and USAID-assisted countries to meet the dual challenges facing child survival programs in the 1990s: 1) extending access to and use of child survival interventions (immunization, control of diarrheal diseases and acute respiratory infections, case management of malaria), and 2) institutionalizing those interventions through strengthened health service delivery systems, sustained behavior change, and policies that support child health and child survival. To meet these dual challenges, BASICS will provide expertise both in the focused technical interventions of child survival and in crosscutting areas of service delivery support (supervision, training, information systems, logistics and supply, operations research), strategies for behavior change, communications and marketing, and primary health care management, planning, and policy. The greatest part of the contract's resources are dedicated to providing several modes of technical assistance (long term assistance, such as regional advisors and resident country advisors; and short term assistance, such as periodic assistance to continuing activities). Other services provided under the contract include support for in-country, regional, and U.S.-based short-term training; information dissemination; support for conferences and workshops; operations research and model projects; a focused small grants project to test innovative service delivery approaches in collaboration with indigenous NGOs; and limited implementation support for critical inputs to child survival programs. These services are provided both through central funds and through buy-ins from field missions and other bureaus.

**Other CAs:** Clark Atlanta University; Emory University; Johns Hopkins University (JHU); The Kingsbury Group; Program for Appropriate Technology in Health (PATH); and Porter Novelli.

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# The CHANGE Project

## Behavior Change Innovation/State-of-the-Art Activity

<b>Cooperating Agency</b>	Academy for Educational Development (AED)/ The Manoff Group
<b>Project Number</b>	936-3096.04
<b>Agreement Number</b>	HRN-A-00-98-00044-00
<b>Duration</b>	9/98-9/03
<b>Geographic Scope</b>	Worldwide

**Purpose:** To provide a focused source of leadership and technical assistance on behavior change to PHN programs worldwide. The purpose of the project is to develop and apply new, state-of-the-art techniques for behavior change that will allow missions to increase the impact, sustainability, scale and cost-effectiveness of their interventions in child health, maternal health, and nutrition.

**Description:** Over 25 years of IEC (information, education, and communication) and social marketing interventions have resulted in numerous solid successes for PHN programs. However, in many programs, significant gaps between knowledge and behavior still remain, and key areas of behavior change such as at the institutional, community, and family levels are not addressed. The CHANGE Project is designed to develop and apply innovative new tools and approaches drawn from the full range of disciplines in the field of applied behavior change to help missions close “knowledge-behavior” gaps and address behavior change at many levels. Some of the new approaches being developed and applied by CHANGE include:

- tools to produce supportive policy and institutional environments through techniques of structural or organizational change;
- techniques to accomplish group and community change through normative and relational change approaches;
- improved techniques for individual behavior change;
- improved approaches to social marketing; and
- application of leading edge technologies in media and communication.

CHANGE can work with regional bureaus and field missions to implement new behavior change programs or can work with existing cooperating agencies and contractors to strengthen existing programs by introducing and supporting new approaches. CHANGE also can provide strategic review and guidance for existing programs and programs under development.

The CHANGE partnership with USAID is through a cooperative agreement and through USAID Mission contributions. CHANGE is implemented in partnership with USAID-financed collaborating agencies and can work with other international donors and both U.S. based and local PVOs. When working with PVOs, CHANGE project funds can be used to supplement existing project staffing and other direct costs to these organizations as needed within the context of a CHANGE project intervention.

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# Child Health Research (Applied Research in Child Health (ARCH))

<b>Cooperating Agency</b>	Harvard Institute for International Development
<b>Project Number</b>	936-5986.09
<b>Agreement Number</b>	HRN-A-00-96-90010-00
<b>Duration</b>	8/96-7/01
<b>Geographic Scope</b>	Worldwide

**Purpose:** To support applied research grants on high priority child health issues that will inform and improve health policies and programs to reduce child morbidity and mortality around the world. Research is conducted in collaboration with host country scientists and institutions in order to strengthen, broaden, and sustain national scientific capacity to conduct policy-relevant, high-quality applied research. The program enables research results to be linked to international and national policy reform and program improvements.

**Description:** The ARCH project builds on the research focus and policy achievements of the predecessor Applied Diarrheal Disease Research (ADDR) project. The research agenda focuses on: 1) behavioral and operations research in the Integrated Management of Childhood Illness (IMCI); 2) antimicrobial resistance (surveillance, prevention, treatment protocols & economic analysis); 3) malnutrition (child feeding and micronutrients); 4) behavioral interventions relating to the prevention and treatment of ARI and diarrhea; 5) malaria; and 6) professional practices, including improving the appropriate use of medicines. Social science research, which is an important complement to the clinical/biomedical research agenda, and communication of findings to decisionmakers are key components of all grants. Research grants are initiated, designed, and managed by host country scientists and institutions. The ARCH project provides technical assistance and collaboration in all phases of research from problem identification and proposal development to implementation monitoring and data analysis. A small portion of project grants are reserved to address innovative, opportunistic research on new and emerging issues. Special attention is given to supporting the research needs and the scientific community in Africa.

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# **Child Health Research (Family Health and Child Survival)**

<b>Cooperating Agency</b>	Johns Hopkins School of Public Health
<b>Project Number</b>	936-5986.05
<b>Agreement Number</b>	HRN-A-00-96-9006-00
<b>Duration</b>	1/96-12/00
<b>Geographic Scope</b>	Worldwide

**Purpose:** To identify new technologies and methods for improving child survival and family health. Focus is on effective and integrated implementation of services to have the greatest impact in developing countries.

**Description:** The project provides support for the delivery and use of effective family health and child survival technologies through applied research and evaluation. Priorities include: 1) development of improved methods to measure the performance, effectiveness, and impact of health and child survival programs; 2) evaluation of the efficacy, feasibility, and cost-effectiveness of new and improved interventions for ARI, diarrhea, malaria, malnutrition, and antimicrobial resistance through epidemiological, biomedical and behavioral studies; and 3) identification and elimination of program constraints through operations research. Communication of research findings to a broad audience is a key component of the project.

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# Child Health Research (ICDDR,B: Centre for Health and Population Research, Bangladesh)

<b>Cooperating Agency</b>	International Centre for Diarrhoeal Disease Research, Bangladesh (ICDDR,B)
<b>Project Number</b>	936-5986.06
<b>Agreement Number</b>	HRN-A-00-96-90005-00
<b>Duration</b>	1/96-12/00
<b>Geographic Scope</b>	Worldwide

**Purpose:** To support high-quality, multi-disciplinary research for improved child health. Emphasis is placed on translating research findings into national and global policy to decrease childhood morbidity and mortality. Training in health research and institution partnerships with multilateral organizations, governments, and donor agencies provide additional means to resolve health and population problems.

**Description:** This agreement provides support for research that develops new and integrated approaches for: 1) preventing and treating diarrheal diseases, malnutrition, and ARI; 2) field testing vaccines and diagnostics; and 3) addressing the problem of antimicrobial resistance. Emphasis is placed on south-south collaborations and developing institutional relationships with health research organizations regionally. The International Centre for Diarrhoeal Disease Research, Bangladesh (ICDDR,B) provides a unique demographic research setting for epidemiological studies, including cholera epidemic surveillance and evaluation of reproductive, maternal, and child health interventions. In addition, ICDDR,B provides training in case management, handles laboratory diagnoses, and serves as a reference center. ICDDR,B maintains a proactive research dissemination and extension approach that uses research results to influence decision-making for policy and programs worldwide.

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# Child Health Research INCLLEN

<b>Cooperating Agency</b>	International Clinical Epidemiology Network (INCLLEN)
<b>Project Number</b>	936-5986.12
<b>Grant Number</b>	TBD
<b>Duration</b>	TBD
<b>Geographic Scope</b>	Worldwide

**Purpose:** To improve health by giving developing country healthcare providers tools to analyze the efficacy, efficiency and equity of health interventions and preventive measures.

**Description:** INCLLEN establishes Clinical Epidemiology Units (CEUs) with high-level, multi-disciplinary research capacity in selected hospital/research institutions. INCLLEN has CEUs in 24 countries, including Egypt, India, Uganda, Zimbabwe, Mexico, Philippines, Thailand, Indonesia, and Brazil. CEUs provide a ready source of high quality in-country clinical researchers who can address USAID priority health concerns, including infectious diseases, HIV/AIDS, child survival and reproductive health. For example, the successful IndiaCLEN Invasive Bacterial Infection Surveillance (IBIS) study used USAID funds to generate the first available prevalence data on pneumonia drug resistant pathogens among children and adults in India. IndiaCLEN also evaluated the impact of Polio Immunization Days on other primary health care services and completed the first STD prevalence study in the state of Tamil Nadu. Worldwide, INCLLEN has trained over 450 developing country physicians and health care specialists at a Masters Degree level in clinical epidemiology, social science, biostatistics or clinical economics. These faculty are committed to using the best available evidence-based research to make appropriate health care decisions and to convey this information to policy makers faced with difficult resource allocation choices.

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# **Child Health Research (World Health Organization/Child and Adolescent Health (WHO/CAH))**

<b>Cooperating Agency</b>	World Health Organization (WHO)
<b>Project Number</b>	936-5986.08
<b>Grant Number</b>	AAG-G-00-97-00024-00
<b>Duration</b>	9/96-9/00
<b>Geographic Scope</b>	Worldwide

**Purpose:** To sustain and increase the gains made in child survival by implementing a focused research agenda that refines existing technologies and develops and tests new cost-effective interventions that reduce mortality and morbidity associated with major childhood illnesses. Emphasis is placed on translating research results into global policies and standards.

**Description:** This grant provides support to the WHO/Department of Child and Adolescent Health for research on: 1) diarrheal disease and ARI case management; 2) the Integrated Management of Childhood Illness (IMCI) algorithm; 3) antimicrobial resistance; and 4) nutrition. Research in these areas includes clinical research, as well as behavioral research that identifies factors affecting and influencing care-seeking behavior, compliance and prevention. Technical assistance, training and operations research to adapt technologies and approaches to local settings are supported, as are the development and adoption of tools that facilitate policy change and management of new clinical approaches.

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# Child Survival Flagship Activity

<b>Cooperating Agency</b>	TBD
<b>Project Number</b>	936-3096.01
<b>Contract Number</b>	TBD
<b>Duration</b>	5 years
<b>Geographic Scope</b>	Worldwide

**Purpose:** The Child Survival Flagship Activity will be a major component of G/PHN’s global work to implement USAID’s Child Survival program. The Flagship will develop innovative and improved policies and program approaches, provide technical leadership within the Agency and the international Child Survival program community, and enter into technical partnerships with field missions and other bureaus to improve the technical quality and effectiveness of programming in USAID-assisted countries.

**Description:** The Flagship activity will incorporate state-of-the-art expertise, extensive field experience and capability in the development and implementation of Child Survival programming in developing countries. It will also influence global and country policies and strategies related to child health and nutrition. This expertise shall be applied to assist G/PHN – in partnership with other USAID bureaus and missions, other organizations, and USAID-assisted countries – in achieving the G/PHN strategic objective of “increased use of effective, improved and sustainable child health interventions” and in contributing to the Agency’s strategic objective of “improving infant and child health and nutrition and reducing infant and child mortality.” The Flagship shall be organized around four key technical focus areas:

1. Increased effectiveness and sustainability of child immunization;
2. Integrated approaches to child health;
3. Incorporating nutrition into Child Survival activities;
4. Neonatal survival and health.

In addition to these four technical focus areas, special attention will also be given HIV/AIDS as it impacts on child health. The flagship will be a performance based contract that achieves its results through the provision of technical leadership, regional and global initiatives, capacity building, and long-term country programs. The flagship will also provide expertise in operations and evaluation research, performance and results monitoring, and strategic documentation and transfer of experience. The duration of the contract is expected to be five years.

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# Children's Vaccine Initiative (CVI) Children's Vaccine Program (CVP))

<b>Cooperating Agency</b>	World Health Organization (WHO) Children's Vaccine Initiative
<b>Project Number</b>	936-6000.06
<b>Grant Number</b>	AAG-G-00-97-00022-00
<b>Duration</b>	9/96-9/00
<b>Geographic Scope</b>	Worldwide

**Purpose:** To accelerate the evaluation and introduction of new vaccines appropriate for use in national immunization programs of developing countries. The initial focus of the program is to limit the impact of acute respiratory illnesses (ARI), the largest cause of infant mortality worldwide, through the introduction of new conjugate vaccines against *Haemophilus Influenzae* type b (Hib) and *Pneumococcus*.

**Description:** USAID is currently working with a variety of partners, including CDC, WHO, the Children's Vaccine Initiative (CVI), vaccine manufacturers, and other donors and foundations to implement the agendas to expedite the introduction of these vaccines. Through a grant to the CVI, USAID is supporting the coordination and implementation of these multifaceted agendas. The five goals of the agendas are:

1. Officials at the global, regional, and national levels understand the magnitude of the disease burden of Hib and Pneumococcal disease;
2. Governments and country decisionmakers understand and appreciate the potential costs/benefits of all vaccines, especially those against Hib and *Pneumococcus*;
3. International health organizations develop recommendations for the introduction of Hib and *Pneumococcus* vaccines.
4. The price of Hib and *Pneumococcus* vaccines are proportionate to the country's ability to pay; and
5. Methods for procuring vaccines and supporting immunization programs are available for all countries.

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# HealthTech III (Technologies for Child Health)

<b>Cooperating Agency</b>	Program for Appropriate Technology in Health (PATH)
<b>Project Number</b>	936-5968.03
<b>Agreement Number</b>	HRN-A-00-96-90007-00
<b>Duration</b>	2/96-1/01
<b>Geographic Scope</b>	Worldwide

**Purpose:** HealthTech identifies health needs that can be solved with technological solutions, then adapts, develops, tests, and introduces new health, nutrition and family planning technologies to meet those needs. The technologies are for use by primary health and family planning providers in the developing world to help stabilize populations and protect the health of women and children.

**Description:** For over 15 years, USAID has supported the development and testing of health technologies that are applicable to the prevention and treatment of disease in the developing world. Most technologies are developed in partnership with private sector companies and international health organizations such as WHO. Technologies successfully developed and already available on the market include:

- HIV Dipstick: a low-cost, simple HIV test that exceeds WHO standards;
- SoloShot: the first autodestruct syringe device, available globally through UNICEF;
- UniJect: a pre-filled, single-dose injection system usable with multiple medicaments including vaccines, injectable contraceptives, and uterotonics;
- Vaccine Vial Monitors: indicators on individual vials of oral polio vaccine (OPV) that change color with heat exposure, which can save up to \$10 million per year globally;
- Delivery kit: a locally produced and sold kit for cord care during home births.

Other technologies under development include:

- Vaccine vial monitors for other vaccines besides OPV;
- Low-cost, simple diagnostics for malaria, chlamydia, gonorrhea and syphilis;
- Inexpensive jet injectors for delivery of vaccines without a needle;
- Inexpensive test to monitor the relative vitamin A status within populations;
- Medical waste disposal technologies.

In addition, the HealthTech project offers technology-related services and assistance as requested by Missions or Bureaus, such as the following:

- Management of a schistosomiasis vaccine development project in Egypt.
- Training in procurement of vaccines to the Ministry of Health in Armenia.
- Assistance in technology transfer to the medical products industry in India.
- Development of health information systems and disease tracking in Ukraine.
- AIDS prevention and education programs in collaboration with NGOs in Indonesia.
- Collaboration on the creation of a website on safe injection for Global Bureau.

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# Helen Keller International (HKI)

<b>Cooperating Agency</b>	Helen Keller International (HKI)
<b>Project Number</b>	936-5122.04
<b>Agreement Number</b>	HRN-A-00-98-00013-00
<b>Duration</b>	10/97-3/03
<b>Geographic Scope</b>	Africa, Asia

**Purpose:** The overall goal of this five-year Cooperative Agreement is to contribute to sustainable reductions in micronutrient malnutrition among children and women in Africa and Asia through technical assistance to governments, private voluntary organizations (PVOs) and local non-governmental organizations (NGOs).

**Description:** HKI's nutrition programs initially focused on preventing xerophthalmia, the clinical form of vitamin A deficiency (VAD) that remains the leading cause of childhood blindness in developing countries. As the link between VAD and child mortality became clear, the nutrition program expanded to address subclinical VAD in vulnerable populations, particularly among preschool children. A recent field trial in Nepal suggests that improving the vitamin A status of women during pregnancy may also reduce maternal mortality. HKI's program has over 30 years of experience in designing, implementing, monitoring and evaluating nutrition interventions for children and women, including twenty-four projects funded by USAID. HKI is a leader in expanding and strengthening vitamin A capsule distribution systems, with documented increases in coverage and decreases in deficiency in Asia and Africa. HKI has also worked to increase consumption of a variety of plant and animal sources of vitamin A through social marketing activities in Asia and Africa. The HKI Bangladesh NGO Home Gardening and Nutrition Education Program has led to increased year-round production of fruits and vegetables and greater consumption of vitamin A-rich foods in more than 300,000 households. In the Philippines, HKI has developed a model program to strengthen decentralized management of nutrition programs at the provincial and municipal levels. In Indonesia, HKI has been conducting operations research and promoting school-based delivery of vitamin A, iron, anthelmintic and nutrition education among adolescent girls. HKI is particularly effective in building the capacity of governments and NGOs in nutritional assessment, policy and program development, training, monitoring and evaluation, and operations research.

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# Maternal and Child Health Technical Assistance and Support Contract (TASC)

<b>Cooperating Agency</b>	Various (See Below)
<b>Project Number</b>	936-3096.02
<b>Agreement Number</b>	HRN-I-00-98-00028-00 to HRN-I-00-98-00035-00
<b>Duration</b>	9/98-9/03
<b>Geographic Scope</b>	Worldwide

**Purpose:** To support USAID Bureaus and Missions in the implementation of their Strategic Objectives pertaining to maternal health, child health and nutrition.

**Description:** TASC will provide Missions and Bureaus with long-term teams of resident advisors to help implement programs, short-term technical assistance, and/or support services in maternal health, child health and nutrition. TASC can support integrated MCH programs, beyond the scope of specialized Global activities.

As a Multicontractor Indefinite Quantity Contract (IQC), services will be provided to Missions by a pre-selected group of eight highly qualified cooperating agencies and their twenty-eight subcontractors, providing a wide range of state-of-the-art specialists and expertise. These cooperating agencies will respond to scopes of work developed by a Mission or Bureau, with award of each task order being made by their Contracting Officer, based on review of cost, proposed staff, and technical quality of the responses, as determined by the Mission.

**Special Restrictions:** This project cannot take Field Support funds.

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# Micronutrient Global Leadership

<b>Cooperating Agency</b>	International Life Sciences Institute Research Foundation (ILSI)
<b>Project Number</b>	936-5122.06
<b>Agreement Number</b>	HRN-A-00-98-00027-00
<b>Duration</b>	10/98-9/03
<b>Geographic Scope</b>	Worldwide

**Purpose:** The Micronutrient Global Leadership Cooperative Agreement will provide scientific support to the leadership efforts of USAID to eliminate vitamin A deficiency and significantly reduce iron deficiency anemia.

**Description:** There are four components covered by the Micronutrient Global Leadership agreement. The first is the International Vitamin A Consultative Group (IVACG), which has been supported by USAID for 20 years. IVACG provides policy statements and state-of-the-art reviews of scientific questions of critical importance to the implementation of vitamin A deficiency control programs. IVACG also provides an exchange mechanism for scientific and programmatic information through its international meetings held every 18 months. The second component is the International Nutritional Anemia Consultative Group (INACG), which has also received support from USAID for 20 years. INACG provides policy guidance on issues critical to the implementation of iron deficiency anemia control programs. INACG is also involved in generating broad support for action by developing countries to control iron deficiency anemia. The third component is the VITA Global Alliance, a new approach to developing public-private partnerships to combat micronutrient malnutrition in developing countries. The private partners include U.S.-based and other food and ingredient companies, as well as nongovernmental organizations and civic groups. The final component is the use of expert panel consultations and targeted operational research to provide a better understanding of the factors that contribute to successful replication and expansion of micronutrient deficiency intervention programs.

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# Micronutrient Operational Strategies and Technologies (MOST)

<b>Cooperating Agency</b>	International Science and Technology Institute (ISTI)
<b>Project Number</b>	936-3094.02
<b>Agreement Number</b>	HRN-A-00-98-00047-00
<b>Duration</b>	9/98-9/03
<b>Geographic Scope</b>	Worldwide

**Purpose:** The Micronutrient Operational Strategies and Technologies (MOST) Cooperative Agreement has as its primary purpose expanded and enhanced delivery of micronutrients to vulnerable populations through supplementation and food-based strategies, including fortification and dietary diversification. MOST will provide leadership in elevating micronutrients on the global health agenda, strengthening policies and programs, and sharing lessons learned about the most cost-effective technologies and delivery systems for alleviating micronutrient deficiencies.

**Description:** Under its mandate as USAID's flagship micronutrient project and in support of USAID's Vitamin A Enhanced Effort (VITA), MOST seeks to establish and maintain vitamin A adequacy in vulnerable populations, particularly young children and their mothers, in 5-8 countries through a combination of supplementation and food-based approaches. MOST is also committed to reducing iron deficiency anemia by 30% in 5-8 countries and contributing to the reduction of iodine deficiency disorders in selected countries by 30%. MOST takes a comprehensive approach to micronutrient deficiency reduction, targeting not only improved supply and delivery of micronutrients, but also generating and sustaining greater consumer demand. Attention is given to optimizing the mix of interventions, depending on the prevalence, distribution, severity and causes of micronutrient deficiencies in a country, the level of sophistication of the country's existing micronutrient programs, and the human and financial resources available. MOST seeks to engage the private sector as a partner with government, especially the food industry, to expand coverage and to establish mechanisms for sustaining successful programs. Economic analyses, as well as program evaluation, will be applied to direct the evolution of the micronutrient policy and program mix in order to realize high coverage in an affordable manner over the long term.

**Other Partners:** ISTI's partners in the MOST include: Johns Hopkins University (JHU); Helen Keller International (HKI); the Academy for Educational Development (AED); the International Food Policy Research Institute; Cooperative for Assistance and Relief Everywhere (CARE); Save the Children; Program for Appropriate Technology in Health (PATH); Population Services International (PSI); and the International Executive Service Corps (IESC).

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# Micronutrients for Health

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<b>Project Number</b>	936-5122.05
<b>Agreement Number</b>	HRN-A-00-97-00015-00
<b>Duration</b>	8/97-9/02
<b>Geographic Scope</b>	Worldwide

**Purpose:** The main purpose of the Micronutrients for Health Cooperative Agreement (MHCA) is to conduct policy- and program-oriented research, provide global scientific leadership and advocacy, and carry out technical assistance and training in micronutrient deficiency prevention.

**Description:** The MHCA addresses key questions related to micronutrient deficiency control through population-based research. The MHCA seeks to advance knowledge and overcome constraints to developing policies and guiding programs toward effective micronutrient deficiency prevention and control. The MHCA is managed by the Center for Human Nutrition, Johns Hopkins University School of Hygiene and Public Health. Activities under the MHCA are conducted by investigators with extensive research capabilities and experience in micronutrient nutrition (including laboratory sciences), epidemiology, biostatistics, anthropology, and communications. The team of investigators has a track record that has led to long-term, productive relationships with counterpart institutions in over a dozen countries in Asia, Africa and Latin America. The MHCA research agenda includes (1) investigating the extent, severity and public health consequences of micronutrient deficiencies in high-risk populations, especially with respect to vitamin A, iron and zinc; (2) identifying determinants of micronutrient deficiencies that are likely to be responsive to interventions; (3) developing new, practical, less expensive and valid methods for targeting high-risk groups, assessing micronutrient status and intake in the community that can be used for surveys, surveillance and program monitoring; and (4) developing single and coordinated multiple-micronutrient interventions and evaluating their efficacy, effectiveness, cost, and safety.

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# Monitoring, Evaluation, and Design/Assessment Support (MEDS)

<b>Cooperating Agency</b>	LTG Associates, Inc.
<b>Project Number</b>	936-3096.03
<b>Contract Number</b>	HRN-I-00-99-00002-00
<b>Duration</b>	1/99-1/04
<b>Geographic Scope</b>	Worldwide

**Purpose:** The Monitoring, Evaluation, and Design/Assessment Support (MEDS) activity will assist Missions and Bureaus in designing, assessing, and evaluating maternal and child health and nutrition programs. MEDS will also provide expert assistance in development of monitoring and evaluation frameworks, plans, and procedures (including identification of appropriate indicators and measurement methods) for Missions, and in designing and carrying out holistic evaluations of field programs in maternal and child health and nutrition.

**Description:** MEDS will be a Single Contractor Indefinite Quantity Contract (IQC). The contractor will not be involved with program implementation to avoid organizational conflict of interest. Specific tasks will include: systematic assessments, design of results frameworks, evaluations, lessons learned, support for technical meetings, project monitoring and analysis, proposal reviews, information dissemination, and literature reviews. MEDS will also serve as the secretariat for strategic and technical expert advisory groups. Missions and Bureaus are welcome to issue task orders to MEDS.

**Subcontractor:** TvT Associates, Inc.

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# Polio Eradication and Immunization Support

<b>Cooperating Agency</b>	UNICEF
<b>Project Number</b>	936-3080.01
<b>Grant Number</b>	AAG-G-00-97-00021-00
<b>Duration</b>	6/95-9/02
<b>Geographic Scope</b>	Africa

**Purpose:** To implement activities to eradicate polio; improve immunization services; introduce IMCI and vitamin A; and monitor progress towards the world summit for children goals in the Africa region.

**Description:** This grant supports activities implemented through UNICEF country, regional and headquarters offices in support of polio eradication, EPI, IMCI, Vitamin A and for monitoring progress on children's health. Funding multiple components provides improved integration of service delivery.

The Polio Eradication component of the grant supports USAID's five-part strategy: 1) to building effective partnerships between all interested public and private sector parties through interagency coordinating committees (ICCs) and to conduct advocacy activities to promote the program; 2) to improve routine immunization and immunization systems: cold chain refurbishment/ management/ logistics, vaccine forecasting, detailed planning and budgeting at the district and national levels; 3) to provide supplemental immunization through training, operational support to National Immunization Days (NIDs), social mobilization, house-to-house mop up immunization, consideration of vitamin A and other antigens; 4) surveillance and case detection for acute flaccid paralysis (AFP) and other reportable diseases such as measles, neonatal tetanus, yellow fever, and meningitis at the community and facility level; 5) information feedback and use, e.g. operations research, monitoring and evaluation, information dissemination.

The EPI component of the grant supports routine immunization program strengthening through: 1) planning and management of programmatic and financial resources to assure vaccines and equipment are available on a sustained basis; 2) improved quality and cost effectiveness of immunization services including training in immunization protocols and guidelines to reduce missed opportunities to vaccinate, and to optimize and enhance EPI-related service delivery particularly in underserved areas, e.g. IMCI, Vitamin A, cold chain, integrated disease surveillance; 3) building effective partnerships to improve coordination and collaboration; and 4) monitoring and evaluation of results.

The IMCI component of the grant supports the introduction of Integrated Management of Childhood illness (IMCI) through improving the performance of health workers through in-service and on-the-job training and through improvements in household and community preventive health practices and care-seeking behavior.

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# Polio Eradication and Immunization Support

<b>Cooperating Agency</b>	UNICEF
<b>Project Number</b>	936-3080.02
<b>Grant Number</b>	AAG-G-00-97-00020-00
<b>Duration</b>	6/95-9/02
<b>Geographic Scope</b>	Asia

**Purpose:** To implement activities to eradicate polio and improve immunization services in the Asia region.

**Description:** This grant supports activities implemented through UNICEF country offices, primarily India, in support of polio eradication in the context of strengthening immunization and disease control programs.

The grant supports USAID's five-part polio eradication strategy: 1) to build effective partnerships between all interested public and private sector parties through interagency coordinating committees (ICCs) and to conduct advocacy activities to promote the program; 2) to improve routine immunization and immunization systems: cold chain refurbishment/ management/ logistics, vaccine forecasting, detailed planning and budgeting at the district and national levels; 3) to provide supplemental immunization through training, operational support to National Immunization Days (NIDs), social mobilization, house-to-house mop up immunization, consideration of vitamin A and other antigens; 4) surveillance and case detection for acute flaccid paralysis (AFP) and other reportable diseases such as measles, neonatal tetanus, yellow fever, and meningitis at the community and facility level; 5) information feedback and use, e.g. operations research, monitoring and evaluation, information dissemination.

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# Polio Eradication and Immunization Support

<b>Cooperating Agency</b>	World Health Organization (WHO)
<b>Project Number</b>	936-3080.03
<b>Grant Number</b>	AAG-G-00-97-00019-00
<b>Duration</b>	6/95-9/02
<b>Geographic Scope</b>	Worldwide

**Purpose:** To implement activities to eradicate polio and improve immunization services.

**Description:** This grant supports activities implemented through WHO country offices, regional offices and headquarters in support of polio eradication in the context of strengthening immunization and disease control programs.

The grant supports USAID's five-part polio eradication strategy: 1) to build effective partnerships between all interested public and private sector parties through interagency coordinating committees (ICCs) and to conduct advocacy activities to promote the program; 2) to improve routine immunization and immunization systems: cold chain refurbishment/ management/ logistics, vaccine forecasting, detailed planning and budgeting at the district and national levels; 3) to provide supplemental immunization through training, operational support to National Immunization Days (NIDs), social mobilization, house-to-house mop up immunization, consideration of vitamin A and other antigens; 4) surveillance and case detection for acute flaccid paralysis (AFP) and other reportable diseases such as measles, neonatal tetanus, yellow fever, and meningitis at the community and facility level and to support the polio laboratory network; 5) information feedback and use, e.g. operations research, monitoring and evaluation, information dissemination, and progress towards certification.

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# Polio Eradication and Immunization Support

<b>Cooperating Agency</b>	CORE/World Vision Relief and Development, Inc.
<b>Project Number</b>	936-3080.04
<b>Agreement Number</b>	HRN-A-00-98-00053-00
<b>Duration</b>	9/98-9/02
<b>Geographic Scope</b>	Africa, Asia, Central Asia, ENI, Near East

**Purpose:** To increase PVO participation in polio eradication, immunization and vitamin A activities and to improve case detection of acute flaccid paralysis (AFP) and other reportable diseases in underserved or hard to reach populations.

**Description:** The CORE group is a network of 32 US-based private voluntary organizations that have received funding from the USAID Bureau of Humanitarian Response's child survival grants in the past for improving maternal and child health in underserved populations. World Vision is the host organization for CORE. This agreement strengthens the network and builds upon ongoing field programs of CORE members. This grant supports: 1) the development of community-based case detection and reporting strategies for acute flaccid paralysis and other vaccine preventable diseases. These strategies will complement and enhance the facility-based approaches being developed by other implementing agencies; 2) the training and information dissemination about polio eradication and AFP/integrated disease case detection and reporting; 3) the participation of PVOs in interagency coordinating committees and subnational planning events; and 4) PVO participation in supplemental immunization activities (NIDs, SNIDs, mop-up). CORE members from any polio endemic or recently endemic country can request funding under this agreement (via the CORE central office). Requests for funding must be coordinated with the respective national polio program. Linkages between CORE members and with local PVOs are encouraged. The CORE central office will monitor and track PVO participation in polio eradication, develop a set of indicators to measure the contribution of PVOs towards this effort; and document and disseminate the lessons learned from polio eradication in order to strengthen routine EPI and other disease control efforts in the future. Over the life of the project, CORE will integrate vitamin A activities into country-specific efforts as part of their child survival programs.

The grant supports USAID's five-part polio eradication strategy: 1) to build effective partnerships between all interested public and private sector parties through interagency coordinating committees (ICCs) and to conduct advocacy activities to promote the program; 2) to improve routine immunization and immunization systems: cold chain refurbishment/ management/ logistics, vaccine forecasting, detailed planning and budgeting at the district and national levels; 3) to provide supplemental immunization through training, operational support to National Immunization Days (NIDs), social mobilization, house-to-house mop up immunization, consideration of vitamin A and other antigens; 4) surveillance and case detection for AFP and other reportable diseases such as measles, neonatal tetanus, yellow fever, and meningitis at the community and facility level and to support the polio laboratory network; 5) information feedback and use, e.g. operations research, monitoring and evaluation, information dissemination, and progress towards certification.

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# U.S. Peace Corps (Health Resources Support II)

<b>Cooperating Agency</b>	U.S. Peace Corps
<b>Project Number</b>	936-6004.52
<b>Agreement Number</b>	HRN-P-00-95-00015-00
<b>Duration</b>	8/86-9/00
<b>Geographic Scope</b>	Worldwide

**Purpose:** To provide program and training support to Peace Corps field staff, volunteers, and host country counterparts to strengthen and expand environmental, child, and maternal health, HIV/AIDS, and special displaced youth activities.

**Description:** Services through this agreement include programming consultation to develop health-related assignments for Peace Corps volunteers, and training support through in-service and pre-service training workshops.

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# Vaccine Independence Initiative (VII) (Children's Vaccine Program (CVP))

<b>Cooperating Agency</b>	UNICEF
<b>Project Number</b>	936-6000.01
<b>Grant Number</b>	HRN-G-00-92-00011-00
<b>Duration</b>	1/92-7/00
<b>Geographic Scope</b>	Worldwide

**Purpose:** To promote the sustainability of national immunization programs by providing a mechanism for the forecasting, financing, and procurement of high-quality vaccines.

**Description:** Childhood immunization programs have been one of the great public health success stories in the past two decades, with an estimated 2.5 million child deaths now prevented annually through national Expanded Programs for Immunization (EPI). However, the sustainability of these achievements is jeopardized by the dependence of many developing countries on donations of vaccines from UNICEF and bilateral donors. Due to financial constraints of donors and concerns about sustainability, many countries that currently receive vaccines by donations are being encouraged to start purchasing at least a portion of their own vaccines. Yet many are unable to:

- accurately forecast and plan vaccine needs;
- prepare a vaccine tender and negotiate directly with manufacturers; or
- supply the hard currency that manufacturers require in advance of vaccine delivery.

USAID Children's Vaccine Initiative Project, in partnership with UNICEF, designed the Vaccine Independence Initiative (VII) to help countries overcome these obstacles. The VII is a vaccine-purchase revolving fund. It is modeled after a similar fund managed by the Pan American Health Organization that has successfully functioned in Latin America for over a decade. The potential benefits of the VII extend to all countries (outside Latin America) who are committed to buying vaccines and who need assistance in forecasting, planning, and ordering those vaccines. To participate in the VII, countries must formally commit, in written agreements with UNICEF, to purchase some or all of their vaccine needs. UNICEF will then provide technical assistance to the countries to enhance their capabilities in vaccine supply forecasting and planning. The fund allows participating countries to use soft or hard currency to purchase the high-quality vaccines on a routine basis and to pay, if necessary, upon receipt of the vaccines. Purchase of the vaccines is undertaken using the well-established UNICEF procurement system, which has successfully negotiated low prices for high-quality vaccines for many years.

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# Vaccine Quality Assurance Training Program (International Children's Vaccine Training Program (IVP))

<b>Cooperating Agency</b>	Massachusetts Biologic Laboratories (MBL)
<b>Project Number</b>	936-6000.05
<b>Agreement Number</b>	HRN-A-00-95-00023-00
<b>Duration</b>	9/95-9/00
<b>Geographic Scope</b>	Worldwide

**Purpose:** To improve the quality of vaccines used in developing countries.

**Description:** The global Children's Vaccine Initiative was launched to galvanize support for and coordinate international efforts to develop, introduce, and deliver in a sustainable fashion new and improved vaccines for the world's children. The ultimate goal of the initiative is the introduction of an affordable, single-dose, combination vaccine that is administered orally at or near birth and provides long-lasting protection against a wide spectrum of diseases.

It is generally assumed that Diphtheria, Tetanus and Pertussis (DTP) will serve as the platform for the addition of new combinations. Since over 60% of the DTP vaccine used worldwide is produced in developing countries, for such combinations to be widely available to children in the developing world it will be necessary for developing country manufacturers to produce them.

In order to help ensure that the current DTP vaccines are of high quality and to provide an appropriate foundation for new combinations, this activity has developed a program that will provide theoretical and practical training in: 1) current Good Manufacturing Practices (cGMP); 2) Vaccine Quality Assurance (QA); and 3) Quality Control procedures for Diphtheria, Tetanus and Pertussis Vaccine (QC). The program assists local manufacturers in establishing or improving their vaccine quality assurance programs. It also assists national regulatory authorities (NRAs) in understanding the requirements of GMP so that they can do a more effective job of regulating and inspecting vaccine production facilities. For countries that are procuring their vaccine rather than producing it locally, the program works with the national regulatory authority to help ensure that the vaccines they procure are of known good quality.

Developing countries are selected for training based on their commitment to strengthening or establishing a national program of regulation and control that ensures vaccines are manufactured according to world standards. In the case of non-producer countries the training program assists national authorities in controlling the quality of the vaccines they import. Training involves an intensive period of instruction, observation and practice audits in Massachusetts with follow-up site visits by training staff to assist in implementation.

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# Africa Integrated Malaria Initiative (AIMI)

Cooperating Agency	N/A
Project Number	936-3081
Agreement Number	Not applicable
Duration	9/96-9/02
Geographic Scope	Kenya, Malawi, Zambia, Benin

**Purpose:** In FY 1996, AIMI was authorized as a “shell project” (AIMI Project #936-3081) to receive funds from Missions and the USAID Africa Bureau to support AIMI activities, which in turn would be re-obligated through the current contracting mechanisms available to the Office of Health and Nutrition. AIMI is focused on sustained reduction in malaria-related illness and death. Several of the Office of Health and Nutrition’s field support projects- the Child Health Flagship project, Partnerships for Health Reform, Environmental Health, MotherCare, and Quality Assurance, as well as the Centers for Disease Control and Prevention, are part of the AIMI “package”.

**Description:** Through the *Africa Integrated Malaria Activity* (AIMI), G/PHN/HN and its collaborating agencies, AFR/SD, CDC and select USAID missions have joined in partnership with African ministries of health, and local and U.S. PVOs/NGOs to strengthen the long-term prospects for sustainable and effective malaria control and prevention. AIMI is designed to enable health workers, mothers and home caretakers to manage and prevent malaria-related death and severe illness among children under the age of five years and pregnant women by promoting:

- Improved **management** of pediatric fever and anemia, by both the health worker at the **health facility** and mothers and other caretakers in the **home**;
- Improved access to and demand for malaria **prevention and treatment of pregnant women**;
- Increased demand for, access to, and appropriate use of affordable **insecticide treated materials**; and
- More **effective use of human and material resources** through improved collection and use of health and management information systems.

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# AIMI-AFRICARE

Cooperating Agency	Africare
Project Number	936-5994.04
Agreement Number	HRN-A-00-98-00016-00
Duration	2/98-9/01
Geographic Scope	Benin

**Purpose:** To coordinate the implementation of AIMI-related activities in Benin.

**Description:** Through the *Africa Integrated Malaria Activity* (AIMI), G/PHN/HN and its collaborating agencies, the USAID Africa Bureau, the Centers for Disease Control and Prevention and USAID/Benin have joined in partnership with the Benin Ministry of Health and local and U.S. PVOs/NGOs to strengthen the long-term prospects for sustainable and effective malaria control and prevention. AIMI is designed to enable health workers, mothers and home caretakers to manage and prevent malaria-related death and severe illness among children under the age of five years and pregnant women by promoting:

- Improved **management** of pediatric fever and anemia, by both the health worker at the **health facility** and mothers and other caretakers in the **home**;
- Improved access to and demand for malaria **prevention and treatment of pregnant women**;
- Increased demand for, access to, and appropriate use of affordable **insecticide treated materials**; and
- More **effective use of human and material resources** through improved collection and use of health and management information systems.

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# AIMI-AMREF

Cooperating Agency	African Medical and Relief Foundation (AMREF)
Project Number	936-5994.06
Agreement Number	HRN-A-00-98-00004-00
Duration	4/98-9/01
Geographic Scope	Kenya

**Purpose:** To coordinate the implementation of AIMI-related activities in Kenya.

**Description:** Through the *Africa Integrated Malaria Activity* (AIMI), G/PHN/HN and its collaborating agencies, the USAID Africa Bureau, the Centers for Disease Control and Prevention and USAID/Kenya have joined in partnership with the Kenyan Ministry of Health and local and U.S. PVOs/NGOs to strengthen the long-term prospects for sustainable and effective malaria control and prevention. AIMI is designed to enable health workers, mothers and home caretakers to manage and prevent malaria-related death and severe illness among children under the age of five years and pregnant women by promoting:

- Improved **management** of pediatric fever and anemia, by both the health worker at the **health facility** and mothers and other caretakers in the **home**;
- Improved access to and demand for malaria **prevention and treatment of pregnant women**;
- Increased demand for, access to, and appropriate use of affordable **insecticide treated materials**; and
- More **effective use of human and material resources** through improved collection and use of health and management information systems.

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# AIMI-PSI/Bednet

<b>Cooperating Agency</b>	Population Services International (PSI)
<b>Project Number</b>	936-5994.05
<b>Grant Number</b>	HRN-G-00-98-00005-00
<b>Duration</b>	2/98-1/01
<b>Geographic Scope</b>	Malawi

**Purpose:** G/PHN/HN awarded a grant to implement a pilot, three-year malaria control program that will promote the social marketing of impregnated mosquito bednets (IMN) and a retreatment service in the Blantyre District of Malawi. The overall goal of this malaria intervention is to make significant reductions in malaria-related morbidity and mortality in children under age five in Blantyre District. The primary strategy of PSI's intervention is to develop and execute an effective and efficient IMN/retreatment intervention at the household and community levels. A secondary strategy is to strengthen the management capacity of the Malawi social marketing NGO, the Society for Family Health.

**Description:** PSI's Blantyre Bed Net Initiative targets children under five and pregnant women in both the urban and rural sectors of Blantyre District. The estimated combined populations for these two groups are 550,000 urban/peri-urban, and 250,000 rural, respectively. Key project interventions include:

- the introduction of a financially sustainable, branded IMN project and retreatment service;
- comprehensive information, education and communication activities (IE&C);
- training of local health service providers, retailers and PSI Project staff; and
- monitoring and evaluation of project activities with a view toward replication nationwide.

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# Centers for Disease Control and Prevention (CDC) IAA (Infectious Diseases Results Package)

<b>Cooperating Agency</b>	Centers for Disease Control and Prevention (CDC)
<b>Project Number</b>	936-5994.08
<b>Agreement Number</b>	AAG-P-00-98-00003-00
<b>Duration</b>	9/98-9/03
<b>Geographic Scope</b>	Worldwide

**Purpose:** To strengthen the delivery of infectious disease and other health programs in developing countries by accessing technical expertise from the Centers for Disease Control and Prevention and collaborating with the CDC to address infectious disease and other health problems in the developing world.

**Description:** The umbrella interagency agreement with CDC allows USAID to access technical expertise from CDC and is a world-renowned source of specialized technical experience and expertise in the international health field. The IAA supports activities in control and prevention of infectious diseases including tuberculosis, malaria, disease surveillance and antimicrobial resistance; HIV/AIDS; and environmental health.

Specific workplans are developed with appropriate centers or divisions within CDC and activities take the form of linked series of consultancies or long term technical assistance. Activities include:

1. Technical and program support for the development and implementation of appropriate global/regional/country-level health programs and strategies;
2. Monitoring and evaluation of global/regional/country-level health activities, projects and programs; and
3. Studies, assessments, evaluation and other research activities to assist in policy dialogue, planning and formulating health programs.

Missions can access the IAA through field support for either short or long term technical assistance.

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# Displaced Children and Orphans Fund (Health Resources Support II)

<b>Cooperating Agency</b>	N/A
<b>Project Number</b>	936-6004.50
<b>Contract Number</b>	N/A
<b>Duration</b>	N/A
<b>Geographic Scope</b>	Worldwide

**Purpose:** The Displaced Children and Orphans Fund (DCOF) provides financial and technical assistance for community-based programs that assist children who are at extremely high risk of societal exclusion as a result of being separated or orphaned from their parents.

**Description:** This Congressionally mandated fund is coordinated and supported by the Office of Health and Nutrition, although most activities are implemented through USAID Mission - managed grants and agreements.

The major portion of these funds are used to support programs activities and provide technical assistance for three categories of children who are at “extreme risk,” including “Streetchildren,” “War Affected Children” and “AIDS Orphans.”

DCOF currently supports programs in sixteen countries.

As part of its oversight and managerial responsibilities for the Fund G/PHN/HN maintains a technical assistance contract with the Professional Resource Group International, Inc. (PRGI) which provides technical assistance and support for field missions that are interested in developing or are actively managing field activities under the Fund.

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# Environmental Health Project (EHP)

<b>Cooperating Agency</b>	Camp Dresser & McKee
<b>Project Number</b>	936-5994.01
<b>Contract Number</b>	HRN-C-00-93-00036-00
	HRN-Q-00-93-00037-00
<b>Duration</b>	3/93-3/99
<b>Geographic Scope</b>	Worldwide

**Purpose:** To help USAID missions and bureaus and other development organizations to address both pre- and post-industrial transition health problems related to the environment.

**Description:** EHP concentrates its core resources on environmental health interventions that address the major causes of infant and child mortality in USAID-assisted developing countries (diarrhea, malaria, and acute respiratory infections) in both rural and urban settings. In addition, EHP assists Missions and Bureaus in addressing the health impacts of environmental problems which may result from development, such as urban air pollution, toxic substance (e.g., lead) exposure, and occupational hazards.

To accomplish these objectives, EHP seeks to:

- develop new environmental health tools and interventions to complement other preventive approaches and case management;
- exercise leadership to influence the policies of international and national-level institutions which work in environmental health, with a particular focus on sanitation policy;
- work with communities and households in identifying key environmental health risks, as well as in modifying behaviors and implementing interventions to reduce those risks; and
- assist both governmental institutions and NGOs in more effectively implementing environmental health programs, such as improved management of water supply systems, health promotion and behavior change, and environmental health risk assessment/advocacy.

**Subcontractors:** International Science and Technology Institute (ISTI); John Snow, Inc. (JSI); Radian International; Research Triangle Institute (RTI); and Training Resources Group (TRG).

**Note:** The current contract will be replaced by task order-based Indefinite Quantity Contract (IQC) 936-5994.10 in March 1999. This mechanism will provide much of the same functionality available through the current contract, including acceptance and obligation of Field Support funds.

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# Malaria Vaccine Development Program (MVDP)

<b>Cooperating Agency</b>	Various
<b>Project Number</b>	936-6001
<b>Contract Number</b>	Various
<b>Duration</b>	5/92-4/02
<b>Geographic Scope</b>	Worldwide

**Purpose:** To develop vaccines that will reduce malaria-associated mortality and morbidity in developing countries, especially in children.

**Description:** The MVDP focuses on addressing the major bottleneck in malaria vaccine development: the translation of promising laboratory findings into vaccines that can be evaluated in humans. To accomplish this, the program supports the:

- scaled-up production of laboratory constructs;
- manufacture of pilot lots of vaccines for evaluation in humans;
- conduct of preclinical studies;
- application to the Food and Drug Administration for approval to conduct clinical trials;
- conduct of clinical trials; and
- conduct of field trials.

These capabilities are available to the MVDP through agreements with other domestic agencies (National Institutes of Health, Centers for Disease Control and Prevention, and the Department of Defense) and international groups involved in the development of malaria vaccines (Commission of European Communities and the World Health Organization Special Programme for Research and Training in Tropical Disease Research).

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# NeTMark

<b>Cooperating Agency</b>	TBD
<b>Project Number</b>	936-5994.09
<b>Agreement Number</b>	TBD
<b>Duration</b>	5 years
<b>Geographic Scope</b>	Africa Region

**Purpose:** NetMark is a five-year, Africa regional competitive award focused on achieving economically and socially sustainable promotion and delivery of effective insecticide treated bednets and other materials (ITM) services. To achieve this goal NetMark will focus on strengthening the capacity of the commercial sector, in partnership with the public health sector, to promote the appropriate use and distribution of netting and insecticides. NetMark will be competitively awarded in early 1999 calendar year.

**Description:** NetMark is expected to result in a limited number of countries offering a full range of effective and self-sustaining ITM services through commercial channels, as measured in part by:

- full cost-recovery on the sale of netting and insecticides;
- functional commercial distribution systems;
- capacity to promote and distribute netting, retreatment and appropriate use; and
- accessible retreatment services.

In addition, it is planned that with the conclusion of the five-year award the country-level commercial “spin offs” from NetMark will be fully capable of sustained provision of quality ITM services, as well as providing expanded coverage to new populations.

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# Office of International and Refugee Health/DHHS (Health Resources Support II)

<b>Cooperating Agency</b>	Office of International and Refugee Health (OIRH), Department of Health and Human Services (DHHS)
<b>Project Number</b>	936-6004.01
<b>Agreement Number</b>	HRN-P-HI-92-00057-00
<b>Duration</b>	9/93-9/02
<b>Geographic Scope</b>	Worldwide

**Purpose:** To improve the design, coordination, implementation, management, and evaluation of health, child survival, HIV/AIDS, and other related projects and programs in developing countries.

**Description:** This PASA provides a fast-turn-around mechanism that enables USAID field missions and local governments to access specialized, short-term assistance and expertise from the various member agencies of the Department of Health and Human Services (DHHS).

The Health PASA has been a responsive mechanism to accessing DHHS expertise to assist in various disease outbreaks around the world. During the life of this PASA, DHHS has assisted ministries of health in every region of the world with disease outbreaks including hemorrhagic fever, the plague, meningitis, Ebola, cholera, leptospirosis, o'nyong-nyong fever and monkeypox. This assistance brings state-of-the-art surveillance techniques, laboratory testing methods, treatment modalities, and prevention and control methods to ministry of health staff dealing with these unexpected epidemics.

The PASA also provides for proposal reviews dealing with child survival and other technical assistance as needed.

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# Onchocerciasis Control Program (OCP)

<b>Cooperating Agency</b>	World Bank
<b>Project Number</b>	698-0485.01
<b>Grant Number</b>	AAG-G-00-97-00025-00
<b>Duration</b>	9/92-12/02
<b>Geographic Scope</b>	Africa Region

**Purpose:** The Onchocerciasis Control Program was authorized on September 17, 1992, to provide the U.S. financial contribution to the World Bank Onchocerciasis Trust Fund for the West Africa Onchocerciasis Control Programme (OCP); and amended in 1996 to allow contributions to the Fund to be used to support the newly formed Africa Programme for Onchocerciasis Control (APOC), a 16 country program to extend onchocerciasis control to oncho-endemic countries not covered by the West African Onchocerciasis Control Program (OCP).

**Description:** USAID's onchocerciasis project is expected to achieve the following kinds of results:

- transfer to national programs within the OCP the capacity for continued delivery of ivermectin through community-based approaches by 2002;
- strengthening the epidemiological evaluation and surveillance capacity of OCP member states to detect and control recrudescence, and where needed maintaining effective vector control operations;
- elimination of onchocerciasis-related blindness from the approximately 16 APOC African countries where the diseases is still a major public health problem;
- building sustainable community-based systems capable of annual delivery of ivermectin.
- establishment of effective collaborations between non-governmental organizations and national ministries of health in the planning and implementation of local ivermectin delivery programs.

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# The Patrick J. Leahy War Victims Fund (Health Resources Support II)

<b>Cooperating Agency</b>	N/A
<b>Project Number</b>	936-6004.55
<b>Contract Number</b>	N/A
<b>Duration</b>	N/A
<b>Geographic Scope</b>	Worldwide

**Purpose:** The Patrick J. Leahy War Victims Fund (LWVF) primarily provides financial and technical assistance for programs that address the needs of civilians who suffer from physical disabilities as a result of war, and especially amputees who have lost limbs as a result of landmine accidents.

**Description:** The LWVF is mainly concerned with the provision of orthopedic services and devices to ensure unassisted mobility for war victims. Assistance consists mainly of training and institutional capacity strengthening, facilities upgrading, materials provision, and support for national disabilities policy reform and public advocacy.

LWVF programs also support the reintegration of war victims back into social, educational, recreational and economic mainstreams.

This Congressionally mandated fund is coordinated and supported by the Office of Health and Nutrition, although most activities are implemented through grants and agreements that are managed by USAID Missions.

The LWVF currently supports program activities in ten countries.

As part of its oversight and managerial responsibilities for the Fund G/PHN/HN maintains a technical assistance contract with the Professional Resource Group International, Inc. (PRGI) which provides technical assistance and support for field missions that are interested in developing or are actively managing field activities under the Fund.

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# World Health Organization Umbrella Grant (Infectious Diseases Results Package)

<b>Cooperating Agency</b>	World Health Organization (WHO)
<b>Project Number</b>	936-5994.01
<b>Grant Number</b>	AAG-G-00-98-00008-00
<b>Duration</b>	9/98-9/03
<b>Geographic Scope</b>	Worldwide

**Purpose:** This grant provides support to the World Health Organization to carry out collaborative activities with USAID in infectious diseases, maternal and child health and HIV/AIDS.

**Description:** The umbrella grant to WHO consolidates most of the Office of Health and Nutrition's agreements with WHO under a simplified mechanism. The grant supports broad USAID-WHO collaborations in tuberculosis, malaria and other vector borne diseases (e.g., dengue), disease surveillance, antimicrobial resistance, and HIV/AIDS -- at WHO headquarters in Geneva as well as at regional and country offices.

Specifically, support is provided to WHO's relevant technical and program divisions for technical input and assistance in the development, implementation and/or evaluation of health programs and studies including:

- global strategy development;
- technical analyses;
- demonstration activities and feasibility studies;
- capacity building;
- policy reform;
- project evaluation and assessments;
- monitoring and evaluation;
- workshops and conferences;
- education/information strategies.

Missions can access WHO technical expertise via field support.

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# CDC/Infotech (Data for Decision Making)

<b>Cooperating Agency</b>	Centers for Disease Control and Prevention (CDC)
<b>Project Number</b>	936-5994.08
<b>Agreement Number</b>	AAG-P-00-98-00003-00
<b>Duration</b>	4/91-12/03
<b>Geographic Scope</b>	Worldwide

**Purpose:** To work with host country technicians to improve the quality and accessibility of health information.

**Description:** The project develops and tests approaches to increase data-based decision making for setting public health policies and for planning, managing, and evaluating programs. The project increases the abilities of decision makers (at policy and program levels, especially at the district level in decentralized health systems) to articulate problems and information needs. Epidemiologic and other information is used to set policies and health priorities, plan programs, implement cost-effective interventions, and evaluate prevention and control efforts.

[Note: This project is the continuation of project 936-5991.02, Agreement number DPE-5991-X-HC-1038-00].

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# Center for International Health Information (CIHI) (Data for Decision Making)

<b>Cooperating Agency</b>	Information Management Consultants, Inc. (IMC)
<b>Project Number</b>	936-5991.05
<b>Contract Number</b>	HRN-C-00-93-00041-00 HRN-Q-00-93-00042-00
<b>Duration</b>	9/93-1/99
<b>Geographic Scope</b>	Worldwide

**Purpose:** To provide information on the Population, Health and Nutrition (PHN) sector in developing countries assisted by USAID. Dissemination of this information assists PHN sector planning, evaluation, and decisionmaking within USAID, in USAID host countries, and among the various agencies and other organizations working in cooperation with USAID.

**Description:** The Center for International Health Information (CIHI) is a USAID information management activity operated by Information Management Consultants, Inc. in conjunction with The Futures Group International and the International Science and Technology Institute (ISTI). The project serves as a repository for PHN project information, including PHN indicators, and maintains a global database of statistical indicators of health status for USAID-assisted countries. CIHI maintains an active data dissemination program, including preparation and distribution of country profiles and briefs, an extensive number of reports on health indicator trends, funding trends, annual reports to Congress, statistical wall charts, and other materials. CIHI is also available to provide assistance in project design and evaluation, strategic planning and results packages.

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# DDM/Harvard (Data for Decision Making)

<b>Cooperating Agency</b>	Harvard School of Public Health (HSPH)
<b>Project Number</b>	936-5991.01
<b>Agreement Number</b>	DPE-A-00-91-00052-00
<b>Duration</b>	4/91-6/99
<b>Geographic Scope</b>	Worldwide

**Purpose:** To support health sector reform and assist health sector leadership in developing countries in making informed policy and financing decisions.

**Description:** DDM/Harvard develops and applies tools and methodologies for data collection and analysis that policy leaders can use to formulate health policy and advocate for reform. DDM/Harvard has achieved particular success in bringing economic and financial concerns into the forefront of national health planning processes. Examples of tools developed and used under this project include: National Health Accounts, a system for tracking public and private resources and expenditures on health care; Private Sector Analysis, which quantifies the role of private health providers in national health systems; Cost Effectiveness Analysis on reproductive health and HIV/AIDS interventions; and Political Mapping to analyze political forces underlying health sector reform.

Harvard School of Public Health (HSPH) is a subcontractor for the Partnerships for Health Reform (PHR) project and it is recommended that USAID units wishing to gain access to HSPH expertise on health care reform and financing issues use that ongoing mechanism.

**Special Restrictions:** As this cooperative agreement nears completion, the only additional funding it can accept in FY99 is the amount already planned to complete activities which are part of ongoing, fully-defined workplans from selected field Missions and Regional Bureaus, specifically, USAID/Bolivia, USAID/Poland and USAID's Bureau for Latin America & Caribbean.

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## Global Health Council/NCIH (Health Resources Support II)

Cooperating Agency	Global Health Council/NCIH
Project Number	936-6004.43
Agreement Number	DPE-A-00-91-00010-00
Duration	5/91-7/99
Geographic Scope	Worldwide

**Purpose:** To support the overall objectives of the Global Health Council/NCIH (formerly known as NCIH-the National Council for International Health), with specific support for international conferences and HIV/AIDS activities.

**Description:** This project provides support for: 1) the annual Global Health Council Conference; and 2) an initiative to benefit U.S.-based private voluntary organizations (PVOs working with HIV/AIDS prevention and control in developing countries).

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# Partnerships for Health Reform (PHR)

<b>Cooperating Agency</b>	Abt Associates, Inc.
<b>Project Number</b>	936-5974.13
<b>Contract Number</b>	HRN-C-00-95-00024-00
<b>Duration</b>	10/95-10/00
<b>Geographic Scope</b>	Worldwide

**Purpose:** To provide technical assistance, training, and collaborative research regarding health policy and management, health financing, and health service improvement in developing countries.

**Description:** This project is the principal USAID technical service resource in health policy and sector reform. As the flagship project in this field, PHR offers developing and newly independent countries state-of-the-art assistance to analyze the efficiency, effectiveness, and equity of their health systems. Assistance through the project supports health reform programs, strengthens the role of the private sector in meeting national health goals, and encourages rational pharmaceutical management. Applied research is conducted to inform and improve the assistance given. The following health reform areas are being addressed:

- **Health Policy and Management:** Health policy development and monitoring, institutional reform, decentralization, management capacity-building, and infrastructure and human resource development.
- **Health Financing:** Resource generation through user fees, insurance, and managed care; resource allocation, use, and management; and monitoring of finances, costing, and expenditures.
- **Health Service Improvement:** Health care organization, quality, and supervision; pharmaceutical policy and management; and private sector cooperation and initiatives.

The contract gives attention to participatory approaches to the reform and strengthening of health systems, and makes a concerted effort to link financial and economic analyses to improved health outcomes. No one country would be anticipated to receive services in all these areas, but rather a focused and targeted program would be prepared as a host country strategy for improved effectiveness, governance, and sustainability in the health sector.

**Subcontractors:** University Research Corporation (URC); Harvard School of Public Health; Development Associates, Inc. (DAI); and Howard University.

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# Quality Assurance II (Applied Research in Child Survival Services)

<b>Cooperating Agency</b>	Center for Human Services
<b>Project Number</b>	936-5992.02
<b>Contract Number</b>	HRN-C-00-96-90013-00
<b>Duration</b>	9/96-9/01
<b>Geographic Scope</b>	Worldwide

**Purpose:** To support the effective use of modern quality assurance (QA) approaches in developing country health systems and to support the institutionalization of the quality improvement process through organized QA programs.

**Description:** Quality of care can be defined as the degree to which the care actually delivered matches previously-defined standards. In this view, quality is an objectively measurable property of health services. Both clinical and non-clinical support services supported by USAID are highly amenable to such standards. However, assessments have consistently shown that the actual care provided in developing country programs falls far short of the programs' own standards, undermining the impact of training and other inputs. A wide range of QA tools, largely drawn from US experience, has been adapted to developing countries' needs and is available to address quality issues. These techniques have proven effective in settings ranging from rural Niger to urban Poland, where ordinary health workers have learned to use simple analytical tools to study and improve their own performance based on data they collect themselves. Major areas of assistance include: 1) long-term assistance to institutionalize QA programs; 2) assistance to other CAs and NGOs; 3) quality assessments and project design; 4) evaluation of QA programs; 5) quality-related training; 6) accreditation, licensing, and certification; and 7) applied research addressing issues such as computer-based training, incentive systems, patient satisfaction, developing effective standards, and counseling.

**Subcontractors:** Joint Commission International; Johns Hopkins University School of Public Health; Johns Hopkins Center for Communication Programs (JHU/CCP); and JHPIEGO Corporation.

**Special Restrictions:** This contract does not fund procurement of program commodities.

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# Rational Pharmaceutical Management (RPM)

<b>Cooperating Agency</b>	Management Sciences for Health (MSH)
<b>Project Number</b>	936-5974.08
<b>Agreement Number</b>	HRN-A-00-92-00059-00
<b>Duration</b>	9/92-9/99
<b>Geographic Scope</b>	Worldwide

**Purpose:** To develop, implement, and evaluate the impact of a variety of technical approaches designed to reduce financial waste, improve the allocation and use of resources, promote managerial efficiency, and foster sustainable reforms in developing country pharmaceutical systems. RPM's mandate is to develop state-of-the-art tools, methods, software, and information resources; test them in developing countries; and make them available to other USAID projects, as well as other agencies and organizations active in providing technical assistance in pharmaceutical management.

**Description:** RPM/MSH employs indicator-based assessments and policy dialogue to: identify problems in developing country pharmaceutical sectors; build local stakeholders; and design and implement intervention packages built around specialized training, direct technical assistance, and information dissemination. RPM develops specialized tools to address drug management and use with respect to integrated management of childhood illness, reproductive health services, and improving the use of antimicrobial drugs. There is a separate MSH cooperative agreement for activities in the Russian Federation.

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# Rational Pharmaceutical Management (RPM)

<b>Cooperating Agency</b>	U.S. Pharmacopeial Convention, Inc. (USP)
<b>Project Number</b>	936-5974.09
<b>Agreement Number</b>	HRN-A-00-92-00052-00
<b>Duration</b>	9/92-9/99
<b>Geographic Scope</b>	Worldwide

**Purpose:** To improve access to locally adapted and/or developed unbiased drug information, and to create local capacity to develop, evaluate and utilize current, evidence-based drug information for purposes of drug selection, drug evaluation, clinical decisionmaking, appropriate prescribing and patient education. The USP activity is designed to work in concert with the Management Sciences for Health cooperative agreement.

**Description:** RPM/USP promotes the development of country-specific pharmaceutical information resources and the rational use of drugs by improving access to authoritative, unbiased drug information. Through the use of state-of-the art computer technology and capacity building, the project assists partner organizations in the adaptation and translation of the USP drug information database (USP DI) to produce information that is tailored to meet the needs of target audiences, and suit local conditions. The project supports the establishment of drug information centers and the development of networks of health care professionals engaged in producing and disseminating drug information products and education programs. RPM's strategy emphasizes local control of information resources along with training and program support that will help to ensure sustainability. Additionally, the project develops new drug monographs (for inclusion in the USP DI) for all products on the World Health Organization Model List of Essential Drugs, and develops specialized drug information tools related to reproductive health, polio, and antimicrobial agents. There is a separate cooperative agreement for activities in the Russian Federation.

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# WHO Strengthening of Health Services (SHS)

<b>Cooperating Agency</b>	World Health Organization (WHO)
<b>Project Number</b>	936-5974.04
<b>Grant Number</b>	AAG-G-00-97-00007-00
<b>Duration</b>	9/97-9/99
<b>Geographic Scope</b>	Worldwide

**Purpose:** To support the design, implementation, and management of health sector reforms in developing countries by supporting analyses of the generation, allocation, and management of financial resources for health.

**Description:** This grant supports policy-relevant information by focusing on four key strategies: 1) policy analysis; 2) information support and dissemination; 3) training support; and 4) advocacy and coordination with other units within WHO and with other multi-lateral and bilateral agencies. It is expected that the outcomes of the program will encourage countries to include economic considerations in their national health sector reforms and will improve resource use by health managers.

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# AIDS Social Marketing (AIDSMark)

<b>Cooperating Agency</b>	Population Services International (PSI)
<b>Project Number</b>	936-3090.03
<b>Agreement Number</b>	HRN-A-00-97-00021-00
<b>Duration</b>	9/97-9/02
<b>Geographic Scope</b>	Worldwide

**Purpose:** This project is designed to carry out regional and/or country HIV/AIDS related social marketing program interventions and/or provide country social marketing expertise. AIDSMark will focus on social marketing of critical public health “products” that are appropriate and timely for the setting (male and/or female condoms, STI treatment drugs, STI diagnostic products, etc.) and the “social marketing” of messages and public health concepts.

**Description:** PSI and its partners have strong, complementary skills that will lead to an effective, integrated program. Family Health International will provide assistance in impact evaluation and STI service provider training, while the Program for Appropriate Technology for Health will help with interpersonal communications and STI/HIV product development. Management Sciences for Health will assist in organizational development and STI drug supply management; and the International Center for Research on Women will ensure that gender considerations are integrated into social marketing project design and implementation. The International Planned Parenthood Federation (IPPF) will assist AIDSMark in integrating HIV/AIDS and family planning activities. DKT International will serve as a field implementation partner.

**Subgrantees:** Family Health International (FHI); Program for Appropriate Technology in Health (PATH); Management Sciences for Health (MSH); International Center for Research on Women (ICRW); International Planned Parenthood Federation (IPPF); and DKT International.

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# Design/Monitoring & Evaluation/Lessons Learned/Dissemination (DMELLD)

<b>Cooperating Agency</b>	TvT Associates
<b>Project Number</b>	936-3090.04
<b>Agreement Number</b>	HRN-C-00-99-00005-00
<b>Duration</b>	4/99-4/04
<b>Geographic Scope</b>	Worldwide

**Purpose:** This project will provide the technical expertise needed to design and refine HIV/AIDS strategic objectives and results frameworks; monitor the processes, outcomes and impact of HIV/AIDS prevention and/or mitigation activities; and, to collect and disseminate research, implementation and evaluation findings.

In addition, DMELLD will serve as the major support mechanism for other key G/PHN/HN/HIV-AIDS Division activities such as serving as the Secretariat for the Implementation Working Group (IWG), the resource for the primary HIV/AIDS project database, the source of ongoing technical updates to the field, the source of the HIV/AIDS consultant database and the main HIV/AIDS reference library. Other important support activities will include preparation of major reports, provision of graphic/presentation assistance and the dissemination of finished products.

**Description:** DMELLD will provide the following services:

**D (Design):** informed technical assistance to the field for the design of national HIV/AIDS prevention and mitigation strategies, and Strategic Results Frameworks. The focus of the design activities will be at the SO, IR and sub-IR level, including development of indicators, targets and gross budgets.

**M (Monitoring):** technical assistance to the field to design M&E systems, as well as develop and manage a system to aggregate data from the Mission, Regional Bureau and Global Bureau HIV/AIDS programs.

**E (Evaluation):** technical assistance to Missions in conducting evaluations of programs as requested.

**LL (Lessons Learned):** the identification of lessons learned from information across the G/PHN portfolio and from Mission bilateral projects in order to inform future design and monitoring efforts.

**D (Dissemination):** the gathering and dissemination of information produced by each of the SO4 portfolio members, as well as summarize this information for targeted audiences and thematic focus.

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# Global Health Council/NCIH

<b>Cooperating Agency</b>	Global Health Council/NCIH
<b>Project Number</b>	936-6004.43
<b>Agreement Number</b>	DPE-A-00-91-00010-00
<b>Duration</b>	5/91-7/99
<b>Geographic Scope</b>	Worldwide

**Purpose:** Under this cooperative agreement, the Global Health Council/NCIH (formerly known as NCIH-the National Council for International Health) will perform a key role in supporting the capacity of PVOs and NGOs in implementing USAID-sponsored HIV/AIDS activities. Through its Global AIDS Program, the Global Health Council/NCIH acts as liaison, educator, and coalition builder for U.S. and indigenous private sector entities working in HIV/AIDS prevention as well as serving as a source of varied and up-to-date information on the global AIDS pandemic.

**Description:** The Global Health Council/NCIH Global AIDS Program keeps an expansive database of NGOs from around the world that work in HIV/AIDS activities, and provides information on these NGOs to interested parties, with the goal of networking and alliance building. The Global Health Council/NCIH also provides support to international and regional networks of NGOs. The Global Health Council/NCIH provides seminars, workshops, and special events that build awareness of the global AIDS pandemic in the United States. Through publication of its bimonthly newsletter, *AIDSLINK*, the Global Health Council/NCIH provides news on the global AIDS pandemic, and publishes and disseminates lessons learned in the prevention programs of USAID funded cooperating agencies and other partner NGOs. The Global Health Council/NCIH also acts as the linking partner between the U.S. global response to AIDS and the work of AIDS service organizations in the United States.

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# HIV Operations Research (HORIZONS)

<b>Cooperating Agency</b>	Population Council
<b>Project Number</b>	936-3090.01
<b>Agreement Number</b>	HRN-A-00-97-00012-00
<b>Duration</b>	8/97-7/02
<b>Geographic Scope</b>	Worldwide

**Purpose:** Under a five-year Cooperative Agreement from the U.S. Agency for International Development, the Population Council and its partner organizations of U.S.-based and international organizations will conduct operations research (OR) to develop and identify best practices for the prevention of HIV/AIDS and other sexually transmitted diseases.

**Description:** HORIZONS will feature practical, field-based, program-oriented operations research. The overall research outcome will be the identification of “best practices” for: 1) reducing the risk of acquiring HIV; 2) preventing and managing sexually transmitted infections; 3) implementing strategies for policy analysis and advocacy; 4) providing effective and efficient care and support services for persons infected with or directly affected by HIV/AIDS; 5) ensuring effective community participation; and 6) expanding and enhancing the integration of STI/HIV services into existing maternal and child health, and family planning programs.

**Subgrantees:** Program for Appropriate Technology in Health (PATH); International Center for Research on Women (ICRW); International HIV/AIDS Alliance (London-based); the University of Alabama at Birmingham; The Futures Group International; and Tulane University.

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# Implementing AIDS Prevention and Control Activities (IMPACT)

<b>Cooperating Agency</b>	Family Health International (FHI)
<b>Project Number</b>	936-3090.02
<b>Agreement Number</b>	HRN-A-00-97-00017-00
<b>Duration</b>	9/97-9/02
<b>Geographic Scope</b>	Worldwide

**Purpose:** Family Health International was awarded this cooperative agreement for the design, development, management, monitoring and technical support to regional and/or country specific HIV/AIDS program interventions. This project builds on over ten years of experience by the FHI team in program design, management and evaluation of HIV/AIDS programs in developing countries around the world including the recently completed AIDSCAP project.

**Description:** Working under the HIV/AIDS Global Bureau's Strategic Objective Four, FHI and its partner organizations are available to assist Missions and regional Bureaus in implementing programs that result in reduced sexual risk of HIV acquisition, improved STI prevention and management, minimizing contextual and policy constraints, increased effective linkages between prevention and care, and improved program monitoring and evaluation.

**Subgrantees:** Population Services International (PSI); Program for Appropriate Technology in Health (PATH); Management Sciences for Health (MSH); Institute of Tropical Medicine (ITM); and University of North Carolina (UNC).

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# International HIV/AIDS Alliance

<b>Cooperating Agency</b>	International HIV/AIDS Alliance
<b>Project Number</b>	936-3090.07
<b>Grant Number</b>	HRN-G-00-98-00010-00
<b>Duration</b>	1/98-12/02
<b>Geographic Scope</b>	Worldwide

**Purpose:** Under this grant, the International HIV/AIDS Alliance will continue to mobilize indigenous NGOs and CBOs to respond to AIDS; improve the quality of their work; build capacity of local service organizations and technical support providers, and; document and share lessons about community mobilization and NGO capacity building.

**Description:** The Alliance will continue its already successful work in promoting the integration of HIV and STD work into other community development initiatives, linking prevention and care, and promoting partnerships among local NGOs and between NGOs and government services. The Alliance's national or sub-national level capacity building emphasizes the development of sustainable local NGO support organizations with functions including local and international resource mobilization, technical support in local languages, monitoring, evaluation and NGO sector policy leadership. The Alliance may be particularly useful to Missions and regional Bureaus that wish to mobilize and strengthen community responses in countries on the frontiers of the HIV epidemic, where there is not yet strong local capacity; to involve local health and development NGOs that are not yet responding to AIDS; to ensure coordination with other major bilateral and multilateral donors; to organize South-South technical support, to build a sustainable locally governed infrastructure to mobilize and support NGOs in an ongoing manner.

The International HIV/AIDS Alliance has partner offices in Senegal, Burkina Faso, Philippines, Sri Lanka, India, Bangladesh, Cambodia, Ecuador, Zambia, Mexico, and Morocco. Please contact their London Headquarters for details and contact information.

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# Joint United Nations Programme on HIV/AIDS (UNAIDS)

<b>Cooperating Agency</b>	Joint United Nations Programme on HIV/AIDS (UNAIDS)
<b>Project Number</b>	936-3090.08
<b>Grant Number</b>	AAG-G-00-97-00006-00
<b>Duration</b>	9/97-9/02
<b>Geographic Scope</b>	Worldwide

**Purpose:** To strengthen the capacities of national governments for an expanded response to HIV/AIDS; to provide technical and policy leadership in the global fight against HIV/AIDS and; to facilitate international donor cooperation.

**Description:** USAID has been an active partner with the United Nations in providing financial support for international HIV/AIDS program efforts. Since 1986 USAID has been a major contributor to the WHO Global Program on AIDS. As that program terminated in 1995, USAID support shifted to a new United Nations HIV/AIDS endeavor which officially began in January, 1996. The Joint United Nations Programme on HIV/AIDS (UNAIDS) brings together the efforts of five UN organizations, UNICEF, UNDP, UNFPA, UNESCO, WHO, and the World Bank. The primary focus of UNAIDS is to strengthen the capacities of national governments for an expanded response to HIV/AIDS. UNAIDS plans to achieve this objective through work at a country, regional and global level.

UNAIDS is not a funding agency so that its current annual budget of approximately \$60 million represents the operating budget required to carry out the mandate described above. USAID's contribution through this results package is for the entire UNAIDS program and represents approximately 30 percent of the entire budget. In addition to this direct support for UNAIDS, this activity also includes a USAID contribution to the Coordinated Appeal, a special UNAIDS initiative to raise additional HIV/AIDS resources from other donors which are intended to support the work of the individual cosponsors of UNAIDS.

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# U.S. Bureau of the Census

<b>Cooperating Agency</b>	U.S. Bureau of the Census (BUCEN)
<b>Project Number</b>	936-3090.05
<b>Agreement Number</b>	HRN-P-00-98-00002-00
<b>Duration</b>	1/98-12/02
<b>Geographic Scope</b>	Worldwide

**Purpose:** To maintain the HIV/AIDS Surveillance Data Base; provide demographic and economic models of the impact of the HIV and AIDS in urban and rural areas of the developing world and; disseminate information through a variety of publications and presentations throughout the world.

**Description:** In FY 98, G/PHN entered into an agreement with the U.S. Bureau of Census (BUCEN) for HIV/AIDS data information transfer, demographic modeling and human resources which were - and continue to be - integral to USAID's work in HIV/AIDS. BUCEN contributed to the USAID program with support to monitor the spread of HIV and to understand the potential effect the AIDS pandemic will have on development. The technical assistance from BUCEN for this work has required experience in epidemiological data base projections and population projection modeling. With its worldwide reputation for excellence, the International Programs Center (IPC) represents the preeminent U.S. source for technical expertise in this area.

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# U.S. Peace Corps

<b>Cooperating Agency</b>	U.S. Peace Corps
<b>Project Number</b>	936-3090.06
<b>Agreement Number</b>	AAG-P-00-97-00008-00
<b>Duration</b>	9/97-9/02
<b>Geographic Scope</b>	Worldwide

**Purpose:** Under this agreement, the Peace Corps will continue to promote and expand its community based efforts in HIV/AIDS prevention and care.

**Description:** There are currently 7,000 Peace Corps Volunteers working in over 90 countries around the world. The Interagency Agreement funds will assist with NGO and CBO development; integrated community health approaches to HIV/AIDS prevention and care; programs for women and girls; and programs for youth, both in and out of school. The funds from the agreement will provide technical assistance to Peace Corps Volunteers, field staff, host country officials and counterparts, NGOs and PVOs through training, project design and evaluation assistance, materials development, and dissemination of results.

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# FOCUS on Young Adults

<b>Cooperating Agency</b>	Pathfinder International
<b>Project Number</b>	936-3073
<b>Agreement Number</b>	CCP-A-00-96-90002-00
<b>Duration</b>	11/95-11/00
<b>Geographic Scope</b>	Worldwide

**Purpose:** To improve the health and well-being of young adults through identifying effective adolescent initiatives in developing countries. FOCUS addresses priority issues in young adult reproductive health (YARH), and promotes positive health-related behaviors, access to appropriate information and services, and enhanced public and private sector capabilities.

**Description:** Focus is a PHN Center project. In collaboration with donors and other organizations, FOCUS improves knowledge regarding the conditions and requirements for effective young adult reproductive health programs; disseminates information about past and present initiatives to improve YARH around the world; serves as a technical resource in YARH policy development and as a catalyst for policy changes that promote YARH; and identifies effective training approaches for young people, service providers, policymakers, and program managers. Key objectives are to:

- increase awareness about both the reproductive health needs of young adults and successful initiatives to serve them;
- improve the capability of organizations to design and implement youth initiatives through training, suggesting effective methods of program design, policy analysis, and service delivery; and
- identify what works by collaborating with organizations to document past experience, and to evaluate and undertake practical research on promising programs and policies.

FOCUS works in a limited number of countries, selected on the basis of their potential role in identifying, demonstrating, and evaluating successful approaches to meeting the reproductive health needs of young adults. Drawing on its experience in these countries, FOCUS is helping to develop effective strategies and recommendations for responding to YARH needs worldwide.

**Subcontractors:** The Futures Group International and Tulane University School of Public Health and Tropical Medicine.

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# Food and Nutrition Technical Assistance (FANta)

<b>Cooperating Agency</b>	Academy for Educational Development (AED)
<b>Project Number</b>	936-3094.01
<b>Contract Number</b>	HRN-A-00-98-00046-00
<b>Duration</b>	8/98-9/03
<b>Geographic Scope</b>	Worldwide

**Purpose:** The Food and Nutrition Technical Assistance (FANta) project is designed to leverage maximum nutritional impact of nutrition and food security-related programs implemented by USAID and its partners in developing countries.

**Description:** FANta will provide technical assistance in nutrition and food security-related program design, implementation, monitoring, and evaluation as well as nutrition and food security policy and strategy development. This program has an unprecedented opportunity to influence the nutritional and health impact of food security and Title II food aid programming, both through its role in providing direct assistance to Private Voluntary Organizations (PVOs) and Cooperates, Missions, host governments, the USAID Bureau for Humanitarian Response (BHR), and through its role in facilitating technical exchange and cooperation with other ongoing G/PHN Center activities.

FANta's Strategic Objective is "improved food/nutrition policy, strategy and program development" with three Intermediate Results (IRs):

- IR1: USAID's and PVOs' nutrition and food security-related program development, analysis, monitoring and evaluation improved;
- IR2: USAID, host country governments and PVOs establish improved, integrated nutrition and food security-related strategies and policies; and
- IR3: Best practices, and "acceptable standards" in nutrition and food security-related policy and programming adopted by USAID, PVOs and other key stakeholders.

**Partners:** Cornell University; Tufts University; and Food Aid Management (FAM).

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# Food Technology and Enterprise (Project SUSTAIN)

<b>Cooperating Agency</b>	National Cooperative Business Association (NCBA)
<b>Project Number</b>	936-5120.01
<b>Agreement Number</b>	DAN-A-00-91-00066-00
<b>Duration</b>	4/91-9/99
<b>Geographic Scope</b>	Worldwide

**Purpose:** To provide access to the U.S. food processing and marketing industry by small- and medium-sized food processing companies, host government officials, and USAID missions in targeting developing countries.

**Description:** The project is designed to increase the quantity, nutritional quality, safety, and affordability of foods in developing countries through improving the capacity of local food enterprises. Expertise from U.S. food manufacturing companies is used to create or upgrade existing food processing and marketing technologies.

SUSTAIN (Sharing U.S. Technology to Aid in the Improvement of Nutrition) provides short- and long-term technical assistance through volunteer professionals from the U.S. food companies, universities, and other organizations. SUSTAIN seeks to improve nutrition and food quality, expand production, and lower operating costs of locally grown and processed food through technical assistance in food fortification; weaning food development; food safety, sanitation and quality; food preservation and storage; food processing, packaging, and marketing; and nutritious snack foods for pregnant and lactating women and adolescents.

Publications include a quarterly newsletter (*SUSTAIN Notes*) on food technology issues. It is provided gratis to over 1,500 recipients in over 50 countries. In addition, a substantive report is prepared by the volunteer(s) following each short-term field assignment. They are available upon request.

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# Linkages: Breastfeeding and LAM, and Related Maternal and Young Child Nutrition

<b>Cooperating Agency</b>	Academy for Educational Development (AED)
<b>Project Number</b>	936-3082.01
<b>Agreement Number</b>	HRN-A-00-97-00007-00
<b>Duration</b>	11/96-10/01
<b>Geographic Scope</b>	Worldwide

**Purpose:** Linkages is the principal USAID initiative for improving breastfeeding (BF), Lactational Amenorrhea Method (LAM), and related maternal and child dietary practices. The focus of the program is on mainstreaming BF, LAM, and related complementary feeding and maternal dietary practices into ongoing Child Survival (CS), Maternal and Child Health (MCH), Family Planning (FP) and Emergency Relief Programs.

**Description:** Principal activities include: 1) technical support to help CAs, PVOs, public sector programs, and other donors improve their BF, LAM, and related infant feeding and maternal nutrition activities; and focusing on mainstreaming these activities at all levels of service delivery, IEC, curricula, and monitoring and evaluation tools in MCH and FP programming; 2) development and testing of community-based strategies, peer counseling and other models, while linking to ongoing efforts in Baby-Friendly Hospital Initiatives (BFHI) and Integrated Management of Childhood Illness (IMCI); 3) interventions in cooperation with large PVO networks and scaling up proven strategies and technologies; 4) private sector initiatives exploring the commercial sector networks; and 5) program-driven research such as operations research, cost-effectiveness, and country program assessments, with in-depth cross-site analysis and smaller focused studies of intervention components.

**Partners:** La Leche League International; Population Services International (PSI); and Wellstart International.

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# Maternal and Neonatal Health Program

<b>Cooperating Agency</b>	JHPIEGO Corporation
<b>Project Number</b>	936-3092.01
<b>Agreement Number</b>	HRN-A-00-98-00043-00
<b>Duration</b>	10/98-9/03
<b>Geographic Scope</b>	Worldwide

**Purpose:** The Maternal and Neonatal Health Program (MNH) is the principal USAID initiative for applying, testing and implementing new approaches and technologies to reduce maternal and newborn deaths in developing countries.

**Description:** The Maternal and Neonatal Health Program directly supports the Agency's goal of reducing deaths, nutrition insecurity and adverse health outcomes to women as a result of pregnancy and childbirth. The program will provide short- and long-term technical assistance to develop country-specific strategic plans with stakeholders that will increase the use of appropriate maternal and neonatal health and nutrition practices and services. A systems approach will be used in the following focus areas: 1) integration of appropriate maternal nutrition interventions into programs; 2) improved birth preparedness, including awareness, access, community planning and antenatal care; 3) improved management of complications, including obstructed labor, hemorrhage, sepsis, eclampsia, and the sequela of incomplete or unsafe abortion; and 4) improved safe delivery, postpartum and newborn care, including quality care and early recognition of complications in the postpartum and newborn period.

The program is intended to increase the demand for and supply of maternal health services through community, family, and women's participation, and to create enabling health systems through policy development and advocacy, research, financing and management interventions, and strengthened service delivery and quality assurance practices.

**Partners:** The Centre for Development and Population Activities (CEDPA); Johns Hopkins University Center for Communication Programs (JHU/CCP); and Program for Appropriate Technology in Health (PATH).

## **AID/W**

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# MotherCare III

<b>Cooperating Agency</b>	John Snow, Inc. (JSI)
<b>Project Number</b>	936-5966.10
<b>Contract Number</b>	HRN-C-00-98-00050-00
<b>Duration</b>	9/98-9/00
<b>Geographic Scope</b>	Worldwide

**Purpose:** This contract is designed to complete selected portions of the MotherCare II Subproject: long-term country programs, operations and applied research, information dissemination, and policy formulation activities for the purpose of scale-up and sustainability of MotherCare II interventions.

**Description:** Services include long-term technical assistance; completion of service delivery, behavior change and policy interventions; monitoring and evaluation of ongoing projects; completion of operations research; information dissemination; and policy formulation. Areas of technical focus include birth preparedness in the family and the community; maternal and neonatal nutrition; post-abortion, antenatal, safe delivery, postpartum and newborn care; treatment of obstetric and newborn complications; postpartum and post-abortion family planning; and STD control in pregnancy.

**Other CAs:** Other CAs include American College of Nurse-Midwives, Family Health International, London School of Hygiene and Tropical Medicine, and University of Indonesia.

**Special Restrictions:** This contract accepts Field Support funds only from Missions with long-term country programs.

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# UNICEF II Grant

<b>Cooperating Agency</b>	UNICEF
<b>Project Number</b>	936-3092
<b>Grant Number</b>	AAG-G-00-98-00002-00
<b>Duration</b>	9/98-9/03
<b>Geographic Scope</b>	Worldwide

**Purpose:** To support safe motherhood activities.

**Description:** This grant supports a USAID/Global Bureau/Population, Health and Nutrition Center partnership with the United Nations Children's Fund (UNICEF) to promote the worldwide improvement of Safe Motherhood programming. UNICEF aims to promote "Mother-Friendly Societies," a strategic approach for accelerating progress toward reducing maternal and neonatal deaths. The Mother-Friendly Societies Movement treats women's access to basic obstetric care as a human right, encourages governments to make sustained investments in safe motherhood, establishes health, nutrition, and basic affordable quality obstetric care, and mobilizes communities to plan for safe deliveries and wanted pregnancies. The aim of the current project is to advance UNICEF Safe Motherhood programming at country level. The project will improve the technical knowledge and skills of regional and country office staff in Safe Motherhood; implement a communications/advocacy strategy; conduct technical consultations to advance best practices; and strengthen interagency coordination.

**Special Restrictions:** This activity does not take Field Support funds.

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# WHO Reproductive Health

<b>Cooperating Agency</b>	World Health Organization (WHO)
<b>Project Number</b>	936-5966.09
<b>Grant Number</b>	AAG-G-00-97-00016-00
<b>Duration</b>	9/97-9/00
<b>Geographic Scope</b>	Worldwide

**Purpose:** This grant is designed to promote the worldwide improvement of Reproductive Health, especially in the areas of maternal and neonatal health and nutrition, prevention and control of sexually transmitted diseases (STDs), and family planning and population issues.

**Description:** This grant supports a Global Bureau/Population, Health and Nutrition Center partnership with the World Health Organization to support maternal and newborn health and nutrition activities including worldwide advocacy for Safe Motherhood; development and application of a costing methodology for maternal and newborn care; district planning for reproductive health; development of a manual for treatment of obstetric complications; maternal mortality estimation; data tabulation on anemia, STDs and HIV in pregnancy, and caesarean section rates; guidelines for basic newborn care, care of the sick newborn and elimination of neonatal tetanus; and operations research on the use of oxytocin in the third stage of labor. Formulation of a joint policy statement on syphilis control, elaboration and dissemination of a maternal and congenital syphilis control training package, and provision of expertise to USAID/MotherCare field STD activities comprise the STD control component of the grant. The population and family planning activities include development of guidelines for improving method mix in family planning services and an information package with updated information on family planning methods.

**Special Restrictions:** This contract does not accept Field Support funds.

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# Health and Child Survival Fellows (HCSF) Program

<b>Cooperating Agency</b>	Johns Hopkins University (JHU)
<b>Project Number</b>	936-6004.09
<b>Agreement Number</b>	HRN-A-00-97-00020-00
<b>Duration</b>	10/97-9/02
<b>Geographic Scope</b>	Worldwide

**Purpose:** Identification, placement, and supervision of Health and Child Survival Fellows and Senior Technical Advisors in Residence (STARs) in field assignments and USAID/W.

**Description:** This program identifies, places, and supervises junior and mid-level experts in field and USAID/W assignments that contribute to the career development and commitment to international health of the experts themselves, as well as to the Agency's health and child survival programs.

The program includes:

- A national secretariat at the Johns Hopkins University Institute for International Programs (JHU/IIP), responsible for management and administration of the program and ensuring the full and effective participation of a broad range of institutions and the selection of the most qualified and committed candidates as Fellows.
- A collaborating network of schools of public health and Historically Black Schools of Medicine (HBCUs), which provides a roster of applications and advisors as a basis for recruitment of Fellows.

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# Technical Advisors in AIDS and Child Survival (TAACS)

<b>Cooperating Agency</b>	See Subprojects
<b>Project Number</b>	936-5970
<b>Contract Number</b>	See Subprojects
<b>Duration</b>	See Subprojects
<b>Geographic Scope</b>	Worldwide

**Purpose:** Under this contract, CEDPA will administer the placement of approximately 40 technical advisors in USAID Missions and USAID Washington to support activities in child survival, family planning and population, HIV/AIDS control and prevention, infectious disease control and prevention, and basic education.

**Description:** CEDPA will also continue to backstop TAACS employed under its previous contracts for this activity, in which the American Red Cross and the Department of Health and Human Services, through the Office of International and Refugee Health, are also participating. Approximately 85 TAACS have been placed since the beginning of the activity in 1987 under a continuing provision in USAID's appropriations legislation. In fiscal year 1998, the legislation expanded the TAACS authority from \$8 million to \$10 million, and authorized broadening of the authority to include basic education. Authority was expanded again in fiscal year 1999 to include other infectious diseases.

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## Office of International and Refugee Health/ Centers for Disease Control and Prevention (OIRH/CDC)

**Cooperating Agency** OIRH/CDC  
**Subproject Number** 936-5970.02  
**Agreement Number** HRN-P-00-98-00015-00  
**Duration** 5/03  
**Geographic Scope** Worldwide

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## The Centre for Development and Population Activities (CEDPA)

**Cooperating Agency** CEDPA  
**Subproject Number** 936-5970.03, 936-5970.38  
**Contract Number** HRN-C-00-98-00006-00  
HRN-C-00-96-90002-00  
**Duration** 8/03, 2/01  
**Geographic Scope** Worldwide

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## American Red Cross (ARC)

**Cooperating Agency** American Red Cross  
**Subproject Number** 936-5970.36  
**Contract Number** HRN-C-00-92-00040-00  
**Duration** 6/99  
**Geographic Scope** Worldwide

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# **Office of Field and Program Support (OFPS)**

## **Roles and Responsibilities**

**OFPS strengthens USAID's efforts to achieve global impact in protecting health and reducing fertility by mobilizing and coordinating available population, health and nutrition resources in support of field programs. Major objectives and functions of the office are as follows:**

### **To Coordinate Strategic Planning for the PHN Center**

- Coordinates the preparation of the Center's Strategic Plan and Results Review & Resource Request (R4), with technical input from PHN/POP and PHN/HN.
- Coordinates regular reviews of Center activities and approaches to ensure consistency with the strategic plan and feasibility within existing financial and human resources.
- Coordinates PHN Center technical input to Agency Strategic Plan, Annual Performance Plan, and Annual Performance Report.
- Organizes periodic country and regional reviews for senior management to identify issues and determine progress toward meeting Agency strategic objectives.
- Organizes and serves as Secretariat for the PHN Sector Council.

### **To Assist Strategic Planning for the Field**

- Assists missions in the development of country strategies and programs, through the framework of the Joint Programming/Planning Country (JPPC) Teams.
- Elicits ideas from the field for developing and testing more effective, cost-efficient, and results-oriented initiatives and results packages in the PHN Center portfolio.
- Promotes country-level coordination in the PHN sector within the Agency and among other donors.
- Represents the field perspective in Agency PHN technical fora, including the PHN Sector Council, other Agency meetings, and external meetings with donors, NGOs, and other institutions.

### **To Provide Field Support and Coordination**

- Coordinates and provides program, technical, and logistical support to the JPPC Teams. Participates as a full member of the joint programming teams, within the JPPC team framework.

- Coordinates the G/PHN technical review of Missions' and regional bureaus' R4s, and ensures that appropriate technical staff from the PHN Center participate.
- Provides or arranges technical assistance to the field for the development, implementation, and evaluation of PHN country programs.
- Provides support to JPPC team coordinators in planning visits from field staff to USAID/W, and provides logistical support, (e.g., messages, scheduling, office support) to visiting field staff.
- Works with JPPC teams to review mission program documentation and serves as a repository for essential field documents.
- Coordinates the dissemination of policy, professional, and legislative updates and technical materials to field offices. Promotes intra-agency exchange of information, e.g., participate as a member of Agency working groups, and ensures that relevant information is transmitted to the field.
- Elicits and coordinates the preparation of selected country-specific information to senior management, including success stories, lessons learned, and technological breakthroughs.

### **To Provide Program Support and Coordination**

- Serves as the focal point in the PHN Center for guidance on all programming actions.
- Coordinates and prepares the PHN Center's portion of the Bureau Budget Submissions (BBS), Congressional Presentations (CPs), Operating Year Budget (OYB), Congressional Notifications (CN's), and rescissions.
- Serves as the PHN Center's point for recording and tracking all Field Support funding levels, based on communications with the missions.
- Serves as PHN Center review and/or approval point for funding actions and implementation documents. Ensures that program design and approval documents (i.e., results packages, authorizations, etc.) developed by the PHN Center Offices are in compliance with Bureau and Agency directives.
- Acts as the PHN Center's training entity for staff training on Field Support funding policies, procedures, and systems.
- Coordinates training and operation of the Agency's funding systems (e.g., New Management Systems (NMS) computerized funding management system) for the PHN Center.
- Provides senior management of Global Bureau and the Agency with information, briefing papers, talking points, and/or memoranda on programmatic and technical issues on global, regional, or country-specific issues.

### **To Provide Coordination for Regional Bureaus and Field Missions**

- Serves as liaison between technical offices, Missions, and Regional Bureaus in the development and negotiation of field support requirements.
- Serves as PHN Center's liaison with the Office of Planning and Budget and the Office of Procurement. Maintains responsibility for the overall Center compliance with Agency procurement and budget policy.
- Facilitates AID/W review processes for Mission PHN program and project documents.
- Participates in G/PHN project workplan reviews and new procurements in order to provide field and budget perspective as appropriate.

### **To Coordinate Overall Sector and Center Performance Monitoring**

- Coordinates the standardization of global PHN performance indicators and assists the Center and the field in using these indicators to track and measure results.
- Coordinates PHN sector analyses to identify trends, determine obstacles, and propose programmatic solutions at Global, Regional and Mission levels.
- Stays abreast of Regional Bureau strategies and program trends in the various PHN subsectors.
- Identifies programming or technical issues and ensures appropriate actions are taken to address them.

### **To Provide Personnel, Communication, and Management Support**

- Identifies and tracks professional and staff requirements for the PHN Center, Bureaus, and the field. Coordinates recruitment of technically-qualified professionals to fill all vacant positions.
- Plans and implements in-service training and professional development programs.
- Manages the PHN Center's Awards Program.
- Manages available space, equipment, furniture, and supplies for the PHN Center.
- Provides technical support for the PHN Center's computer and telecommunications systems.

# **Part V**

## **Project Directory**

### **Regional Bureaus & the Bureau for Humanitarian Response**

#### **Africa**

Hope Sukin-Klauber

#### **Asia & the Near East**

Christopher McDermott

#### **Europe and the New Independent States**

Mary Ann Micka

#### **Latin America & Caribbean**

Carol Dabbs

#### **Humanitarian Response**

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# Health and Human Resources Analysis for Africa (HHRAA)

<b>Cooperating Agency</b>	Multiple
<b>Project Number</b>	698-0483
<b>Agreement Number</b>	N/A
<b>Duration</b>	1992-1999
<b>Geographic Scope</b>	Sub-Saharan Africa

**Purpose:** To increase the utilization of research, analysis, and information in support of improved health, nutrition, education, and family planning strategies, policies, and programs in Africa.

**Description:** The project emphasis is on carrying out research, analysis, and information activities that respond to major issues identified by Africans and USAID missions, and that have the potential to influence strategic and resource allocation decisions at the regional, sub-regional, and country levels. HHRAA provides a participatory process for identifying and analyzing critical and emerging issues related to African health, population, and educational needs, bringing together key African decision-makers with international experts. It addresses social sector issues that are crosscutting among family planning, child survival, HIV/AIDS, and basic education, while linking research with decisionmaking on an Africa-wide scale, using multiple channels of communication. Finally, the project provides an opportunity to build the capacity of African regional and national institutions, including private sector organizations, to conduct research and analysis.

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# ANE Regional HIV/AIDS Program

<b>Cooperating Agency</b>	The ANE program operates
<b>Project Number</b>	through a variety of
<b>Contract Number</b>	Global Bureau Projects
<b>Duration</b>	Varied
<b>Geographic Scope</b>	Asia/Near East Region

**Purpose:** To support the implementation of HIV/AIDS prevention activities throughout the region.

**Description:** Through a variety of G/PHN projects, mostly in the G/PHN/HN/AIDS Division, the ANE bureau uses its funds to support the implementation of HIV/AIDS prevention activities throughout the region. The Bureau's HIV/AIDS strategy expands the capacity of centrally-funded and mission bilateral HIV/AIDS prevention programs and projects which focus primarily on preventing the spread of the epidemic. Through this strategy, the ANE and Global Bureaus and missions are coordinating the use of Agency HIV/AIDS resources to implement an integrated and comprehensive prevention program that addresses the regional dimensions of this global health problem. The Bureau's HIV/AIDS strategy has five primary objectives:

- to limit cross-border HIV/AIDS transmission;
- to address regional HIV/AIDS issues;
- to limit the spread of the epidemic by supporting the initiation of prevention activities in ANE countries;
- to support innovative pilot projects that may be replicated throughout the region;
- to support regional training, policy, and research efforts.

The Bureau's strategic plan was revised in late 1994 in response to the evolving epidemic in Asia and the merger of the Asia and Near East Bureaus.

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# LAC Regional Health Priorities Project

<b>Cooperating Agency</b>	Pan American Health Organization (PAHO)
<b>Project Number</b>	598-0825
<b>Grant Number</b>	<i>See Grants on next page</i>
<b>Duration</b>	1996-2001
<b>Geographic Scope</b>	LAC Region

**Purpose:** The purpose of this five-year project is to improve the effective delivery of selected health services and to increase equitable access to basic health services throughout the region.

**Description:** This project builds on successful efforts of prior projects with PAHO, supporting regional vaccination activities (598-0643 and 598-0786) as well as the LAC Regional Health and Nutrition Technical Services Support Project (598-0687). It provides assistance to LAC country programs to strengthen quality and availability of selected health services: 1) vaccinations; 2) emergency obstetrical care; 3) integrated management of childhood illness (acute respiratory infections and diarrheal disease); and 4) interventions for the control and prevention of antimicrobial resistance, and to effect health sector reforms to increase equity of access to basic health care. Strategic approaches include: 1) improving service delivery; 2) improving surveillance systems; 3) increasing the sustainability of health programs; and 4) health management and financial reforms. Target countries are specific to each project component; e.g., for vaccinations and integrated management of childhood illness, the eight LAC child survival emphasis countries receive more intense support. Implementation uses PAHO's recognized regional leadership and influence on policy and national programs and the cutting edge technical leadership of USAID's worldwide partners in these health technologies. USAID missions may supplement the grants to PAHO under this project to implement their programs. Field Support funds are transferred to the following organizations: University Research Corporation, The Partnership for Child Health, Abt Associates, Harvard University, and Management Sciences for Health.

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## **Vaccination**

**Grant Number** LAC-G-00-97-00008-00  
**Duration** 1996-2000  
**Geographic Scope** LAC Regional

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## **Integrated Management of Childhood Illness**

**Grant Number** LAC-G-00-97-00001-00  
**Duration** 1997-2001  
**Geographic Scope** LAC Regional

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## **Maternal Mortality**

**Grant Number** LAC-G-00-98-00012-00  
**Duration** 1997-2001  
**Geographic Scope** LAC Regional

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## **Reform**

**Grant Number** LAC-G-00-98-00007-00  
**Duration** 1997-2001  
**Geographic Scope** LAC Regional

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## **Infectious Disease**

**Grant Number** TBD  
**Duration** 1999-2001  
**Geographic Scope** LAC Regional

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# PVO Child Survival Assistance Program (CSAP)

<b>Cooperating Agency</b>	See Subgrants
<b>Project Number</b>	938-0500
<b>Grant Number</b>	See Subgrants
<b>Duration</b>	See Subgrants
<b>Geographic Scope</b>	Worldwide

**Purpose:** To meet the critical health needs of infants, children under five years of age, and mothers in those developing countries with high infant, child and maternal mortality rates, and improve the capacity of U.S.-based PVOs and their local partners to carry out effective child survival programs.

**Description:** The PVO Child Survival Assistance Program (CSAP) is an annual competitive program funded and administered by the Bureau for Humanitarian Response (BHR), Office of Private and Voluntary Cooperation (PVC). The program is open to all U.S.-based Private Voluntary Organization (PVOs), registered with USAID, that engage in community health care programming as part of their international development efforts.

The CSAP focuses on strengthening the ability and the capacity of PVO staff to design, manage and evaluate child survival activities, to manage a child survival and health portfolio, to engage in long-term partnerships with NGOs and to disseminate information on PVOs' comparative advantages in child survival and health activities. This program supports institutional strengthening of U.S. PVO headquarters and field staff and their local partners, enhancing their capacity to reduce infant, child, and maternal mortality.

Child Survival activities currently supported through the CSAP include:

- immunization;
- nutrition, including micronutrient promotion or supplementation;
- breastfeeding;
- control of diarrheal disease;
- pneumonia case management;
- control of malaria;
- maternal and newborn care;
- child spacing; and
- prevention of STI and HIV/AIDS, where appropriate.

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## **PVO Child Survival Grants**

## **PVO Child Survival Grants**

## **PVO Child Survival Grants**



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**USAID Washington Contacts** (*alphabetically*)

**USAID Mission PHN Contacts**

**PHN Cooperating Agencies, Contractors and Grantees**

**PHN Cooperating Agency, Contractor and Grantee Field Offices**

**PHN Center Activity Reference Matrix**

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### **Abt Associates, Inc.**

Hampden Square  
4800 Montgomery Lane, Suite 600  
Bethesda, MD 20814-5341  
Telephone: (301) 913-0500  
Fax: (301) 652-3618  
<http://www.phrproject.com>

### **Academy for Educational Development (AED)**

1825 Connecticut Avenue, NW  
Washington, D.C. 20009  
Telephone: (202) 884-8000  
Fax: (202) 884-8400  
<http://www.aed.org>

### **Academy for Educational Development (AED)**

1255 23rd Street, NW, Suite 400  
Washington, DC 20037  
Telephone: (202) 884-8700  
Fax: (202) 884-8701  
<http://www.aed.org>

### **Adventist Development and Relief Agency (ADRA)**

12501 Old Columbia Pike  
Silver Spring, MD 20904-6600  
Telephone: (301) 680-6380  
Fax: (301) 680-6370  
<http://www.adra.org>

### **African Medical and Research Foundation (AMREF)**

19 West 44 Street, Suite 1708  
New York, NY 10036  
Telephone: (212) 768-2440  
Fax: (212) 768-4230  
<http://www.amref.org>

### **Africare**

440 R Street, NW  
Washington, DC 20001  
Telephone: (202) 462-3614  
Fax: (202) 387-1034  
<http://www.africare.org>

### **American Red Cross**

International Services  
1601 North Kent Street, 2nd Floor  
Rosslyn, VA 22209  
Telephone (703) 465-4826  
Fax: (703) 465-4853  
<http://www.redcross.org>

### **Andean Rural Health Care (ARHC)**

P.O. Box 216  
Lake Junaluska, NC 28745-0216  
Telephone: (828) 452-3544  
Fax: (828) 452-7790

### **AVSC International**

440 Ninth Avenue  
New York, NY 10001  
Telephone: (212) 561-8000  
Fax: (212) 779-9489  
<http://www.avsc.org>

### **Basic Health Management, International (BHM)**

1800 North Kent Street, Suite 1060  
Arlington, VA 22209  
Telephone: (703) 522-5540  
Fax: (703) 522-5674  
<http://www.poptechproject.com>

### **Camp Dresser & McKee International Inc.**

EHP Operations Center  
1611 North Kent Street, Suite 300  
Arlington, VA 22209  
Telephone: (703) 247-8730  
Fax: (703) 243-9004  
<http://www.access.digex.net/~ehp>

### **Catholic Relief Services**

209 W. Fayette Street  
Baltimore, MD 21201-3443  
Telephone: (410) 625-2220  
Fax: (410) 234-3178  
<http://www.catholicrelief.org>



**Center for Human Services**

7200 Wisconsin Avenue, Suite 500  
Bethesda, MD 20814-4204  
Telephone: (301) 654-8338  
Fax: (301) 941-8427  
<http://www.urc-chs.com>

**Center for International Health  
Information (CIHI)**

1601 North Kent Street, Suite 1014  
Arlington, VA 22209  
Telephone: (703) 524-5225  
Fax: (703) 243-4669  
<http://www.cihi.com>

Division of Reproductive Health  
**Centers for Disease Control and  
Prevention (CDC)** *(FPLM Project)*

4770 Buford Highway, NE, MS K-22  
Atlanta, GA 30341  
Telephone: (770) 488-5612  
Fax: (770) 488-5628  
<http://www.cdc.gov>

Office of Global Health  
**Centers for Disease Control and  
Prevention (CDC)** *(Environmental Health)*

4770 Buford Highway, NE  
Atlanta, GA 30341  
Telephone: (770) 488-5212  
Fax: (770) 488-1004  
<http://www.cdc.gov>

**Centers for Disease Control and  
Prevention (CDC)** *(Data for Decision Making Project)*

1600 Clifton Road, NE, MS C-08  
Atlanta, GA 30333  
Telephone: (404) 639-2234  
Fax: (404) 639-2230  
<http://www.cdc.gov>

**Centre for Development and Population  
Activities (CEDPA)**

1400 16th Street, NW, Suite 200  
Washington, DC 20036  
Telephone: (202) 667-1142  
Fax: (202) 332-4496  
<http://www.cedpa.org>

**Christian Children's Fund, Inc.**

2821 Emerywood Parkway  
Richmond, VA 23261-6484  
Telephone: (804) 756-2700  
Fax: (804) 756-2718  
<http://www.ccfusa.org>

**Clapp and Mayne, Inc.**

8401 Colesville Road, Suite 425  
Silver Spring, MD 20910  
Telephone: (301) 495-9572  
Fax: (301) 495-9577  
<http://www.cmusa.com>

**Concern Worldwide US, Inc.**

104 East 40th Street, Room 903  
New York, NY 10016  
Telephone: (212) 557-8000  
Fax: (212) 557-8004

**Consortium for International  
Development (CID)**

6367 E. Tanque Verde Road, Suite 200  
Tucson, AZ 85715-3832  
Telephone: (520) 885-0055  
Fax: (520) 886-3244

**Contraceptive Research and Development  
(CONRAD)**

1611 North Kent Street, Suite 806  
Arlington, VA 22209  
Telephone: (703) 524-4744  
Fax: (703) 524-4770  
<http://www.conrad.org/>

**Cooperative for Assistance and Relief  
Everywhere (CARE)**

151 Ellis Street, NE  
Atlanta, GA 30303-2439  
Telephone: (404) 681-2552  
Fax: (404) 577-1205  
<http://www.care.org>



Office of International and Refugee Health  
**Department of Health and Human Services (DHHS)**  
 Parklawn Building  
 5600 Fishers Lane, Room 90  
 Rockville, MD 20857  
 Telephone: (301) 443-1774  
 Fax: (301) 443-0742  
<http://www.dhhs.gov>

**Deloitte Touche Tohmatsu**  
 555 12th Street, NW, Suite 500  
 Washington, DC 20004-1207  
 Telephone: (202) 879-5600  
 Fax: (202) 879-5607  
<http://www.deloitte.com/>

**Development Associates, Inc. (DAI)**  
 1730 North Lynn Street  
 Arlington, VA 22209  
 Telephone: (703) 276-0677  
 Fax: (703) 276-0432

**Educational Development Center, Inc. (EDC)**  
 55 Chapel Street  
 Newton, MA 02158-1060  
 Telephone: (617) 969-7100  
 Fax: (617) 332-6405  
<http://www.edc.org>

**Esperanca, Inc.**  
 1911 West Earll Drive  
 Phoenix, AZ 85015  
 Telephone: (602) 252-7772  
 Fax: (602) 340-9197

**Family Health International (FHI)**  
 P.O. Box 13950  
 Research Triangle Park, NC 27709  
 Telephone: (919) 544-7040  
 Fax: (919) 544-7261  
<http://www.fhi.org>

**Family Health International (FHI)**  
 2101 Wilson Boulevard, Suite 700  
 Arlington, VA 22201  
 Telephone: (703) 516-9779  
 Fax: (703) 516-9781  
<http://www.fhi.org>

**Foundation of Compassionate American Samaritans**  
 P.O. Box 428760  
 Cincinnati, OH 45242-8760  
 Telephone: (513) 621-5300  
 Fax: (513) 621-5307

**The Futures Group International**  
 1050 17th Street, NW, Suite 1000  
 Washington, DC 20036  
 Telephone: (202) 775-9680  
 Fax: (202) 775-9694  
<http://www.tfgi.com/>

Institute for Reproductive Health  
**Georgetown University Medical Center**  
 Room 3004, PHC Building  
 3800 Reservoir Road, NW  
 Washington, DC 20007  
 Telephone: (202) 687-1392  
 Fax: (202) 687-6846  
<http://www.georgetown.edu>

**Global Health Council/NCIH**  
 1701 K Street, NW, Suite 600  
 Washington, DC 20006  
 Telephone: (202) 833-5900  
 Fax: (202) 833-0075  
<http://www.globalhealthcouncil.org/>

**Harvard Institute for International Development**  
 Health Office  
 One Eliot Street  
 Cambridge, MA 02138  
 Telephone: (617) 495-9791  
 Fax: (617) 495-9706  
<http://www.hiid.harvard.edu>  
<http://ih.jhsph.edu/chr/chr.htm>





**Harvard School of Public Health**

665 Huntington Avenue  
Boston, MA 02115  
Telephone: (617) 432-4620  
Fax: (617) 432-2181  
<http://www.hsph.harvard.edu/organizations/ddm/homepage.html>

**Health Alliances International (HAI)**

1107 NE 45 Street, Suite 410  
Seattle, WA 98105  
Telephone: (206) 543-8382  
Fax: (206) 685-4184

**Helen Keller International (HKI)**

90 Washington Street, 15th Floor  
New York, NY 10006-2214  
Telephone: (212) 943-0890  
Fax: (212) 943-1220  
<http://www.hki.org>

**International Centre for Diarrhoeal Disease Research, Bangladesh (ICDDR,B)**

G.P.O. Box No. 128  
Dhaka - 1000 Bangladesh  
Telephone: 880-2-988-2407  
Fax: 880-2-883-116  
<http://www.icddrb.org.sg/>  
<http://ih.jhsph.edu/chr/chr.htm>

**International Clinical Epidemiology Network (INCLEN)**

3600 Market Street  
Philadelphia, PA 19104-2644  
Telephone: (215) 222-7700  
Fax: (215) 222-7741  
<http://www.inclen.org>  
<http://ih.jhsph.edu/chr/chr.htm>

**International Eye Foundation**

7801 Norfolk Avenue  
Bethesda, MD 20814  
Telephone: (301) 986-1830  
Fax: (301) 986-1875

**International HIV/AIDS Alliance**

2 Pentonville Road  
London N1 9HF, UK  
Telephone: 44-171-841-3900  
Fax: 44-171-841-3501

**Human Nutrition Institute**

**International Life Sciences Institute (ILSI)**

ILSI Research Foundation  
1126 16th Street, NW  
Washington, DC 20036  
Telephone: (202) 659-0789  
Fax: (202) 659-3617  
<http://www.ilsa.org>

**International Planned Parenthood Federation (IPPF)**

Regent's College, Inner Circle  
Regent's Park  
London, NW1 4NS, UK  
Telephone: 44-171-487-7900  
Fax: 44-171-487-7864  
<http://www.ippf.org/>

**International Planned Parenthood Federation/ Western Hemisphere Region (IPPF/WHR)**

120 Wall Street, 9th Floor  
New York, NY 10005-3902  
Telephone: (212) 248-4221  
Fax: (212) 248-0240  
<http://www.ippfwhr.org>

**International Science and Technology Institute (ISTI)**

1820 North Fort Myer Drive, Suite 600  
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**Islamic African Relief Agency - U.S. Affiliate**

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<http://www.jhpiego.jhu.edu/>

**John Snow, Inc. (JSI)**

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Fax: (703) 528-7480  
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Telephone: (410) 955-2061 (*Micronutrients for Health*)  
Fax: 410-955-0196 (*Micronutrients for Health*)  
<http://ih.jhsph.edu/chr/fhacs/fhacs.htm>  
<http://ih.jhsph.edu/chr/chr.htm>  
<http://www.jhu.edu/www/research/>

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**Joint United Nations Programme on HIV/AIDS (UNAIDS)**

World Health Organization  
1211 Geneva 27, Switzerland  
Telephone: 41-22-791-4510  
Fax: 41-22-791-4179  
<http://www.us.unaids.org/>

**LTG Associates, Inc.**

6930 Carroll Avenue, Suite 410  
Takoma Park, MD 20912  
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Fax: (301) 270-1966

**Lutheran World Relief, Inc. (LWR)**

390 Park Avenue South  
New York, NY 10016-8803  
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Fax: (212) 213-6081  
<http://www.lwr.org>

**Macro International, Inc.**

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Calverton, MD 20705-3119  
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<http://www.macoint.com/dhs/>

**Management Sciences for Health (MSH)**

891 Centre Street  
Boston, MA 02130  
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Fax: (617) 524-1363  
<http://www.msh.org/>

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Fax: (703) 524-7898  
<http://www.msh.org/>

**Massachusetts Biologic Laboratories (MBL)**

305 South Street  
Jamaica Plain, MA 02130  
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Fax: (617) 983-9081



**Medical Care Development Inc. (MCD)**

1742 R Street, NW  
Washington, DC 20009  
Telephone: (202) 462-1920  
Fax: (202) 265-4078  
<http://www.mcd.org>

**Mercy Corps International**

3030 SW First Avenue  
Portland, OR 97201-4796  
Telephone: (503) 796-6800  
Fax: (503) 796-6844  
<http://www.mercycorps.org>

**Minnesota International Health Volunteers**

122 West Franklin Avenue, Suite 621  
Minneapolis, MN 55404-2480  
Telephone: (612) 871-3759  
Fax: (612) 871-8775

Committee on Population, HA172

**National Academy of Sciences (NAS)**

2101 Constitution Avenue, NW  
Washington, DC 20418  
Telephone: (202) 334-3167  
Fax: (202) 334-3768  
<http://www2.nas.edu/cpop/>

**National Cooperative Business Association (NCBA)**

1400 16th Street, NW, Box 25  
Washington, DC 20036  
Telephone: (202) 328-5180  
Fax: (202) 328-5175  
<http://www.cooperative.org>

**PaL-Tech, Inc.**

1201 Pennsylvania Avenue, NW, Suite 250  
Washington, DC 20004  
Telephone: (202) 661-0350  
Fax: (202) 783-2767  
<http://www.pal-tech.com/>

**Pan American Health Organization (PAHO)**

525 23rd Street, NW  
Washington, DC 20037-2895  
Telephone: (202) 974-3264 (*IMCI*)  
Telephone: (202) 974-3512 (*Maternal. Mortality*)

Telephone: (202) 974-3189 (*Reform*)  
Telephone: (202) 974-3272 (*Infectious Disease*)  
Fax: (202) 974-3656 (*IMCI*)  
Fax: (202) 974-3694 (*Maternal Mortality*)  
Fax: (202) 974-3612 (*Reform*)  
Fax: (202) 974-3688 (*Infectious Disease*)  
<http://www.paho.org>

**Partners for Development (PFD)**

1616 N. Fort Myer Drive, 11th Floor  
Arlington, VA 22209  
Telephone: (703) 528-8336  
Fax: (703) 528-7480  
<http://www.interaction.org/mb/pfd2.html>

**The Partnership for Child Health Care**

1600 Wilson Boulevard, Suite 300  
Arlington, VA 22209  
Telephone: (703) 312-6800  
Fax: (703) 312-6900  
<http://www.basics.org>

**Pathfinder International**

9 Galen Street, Suite 217  
Watertown, MA 02172-4501  
Telephone: (617) 924-7200  
Fax: (617) 924-3833  
<http://www.pathfind.org>

**Pathfinder International**

1201 Connecticut Avenue, NW, Suite 501  
Washington, DC 20036-2605  
Telephone: (202) 835-0818  
Fax: (202) 835-0282  
FOCUS@pathfind.org  
<http://www.pathfind.org>

**Pearl S. Buck Foundation, Inc.**

Green Hills Farm  
P.O. Box 181  
Perkasie, PA 18944-0181  
Telephone: (215) 249-0100  
Fax: (215) 249-9657

**The People-to-People Health Foundation**

Health Sciences Education Centre, Carter Hall  
Millwood, VA 22646



Telephone: (540) 837-2100  
Fax: (540) 837-1813  
<http://www.projhope.org>

**PLAN International USA, Inc.**  
3260 Wilson Boulevard, Suite 11  
Arlington, VA 22201  
Telephone: (703) 807-0190  
Fax: (703) 807-0627

**Population Council**  
One Dag Hammarskjold Plaza  
New York, NY 10017  
Telephone: (212) 339-0500  
Fax: (212) 755-6052  
<http://www.popcouncil.org/>

**Population Council**  
4301 Connecticut Avenue, NW, Suite 280  
Washington, DC 20008  
Telephone: (202) 237-9400  
Fax: (202) 237-8410  
<http://www.popcouncil.org/>

Center for Biomedical Research

**Population Council**  
1230 York Avenue, 6th Floor  
New York, NY 10021  
Telephone: (212) 327-8731  
Fax: (212) 327-7678  
<http://www.popcouncil.org/>

**Population Reference Bureau (PRB)**  
1875 Connecticut Avenue, NW, Suite 250  
Washington, DC 20009  
Telephone: (202) 483-1100  
Fax: (202) 328-3937  
<http://www.prb.org/>

**Population Services International (PSI)**  
1120 19th Street, NW, Suite 600  
Washington, DC 20036  
Telephone: (202) 785-0072  
Fax: (202) 785-0120  
<http://www.psiwash.org>

**Professional Resource Group  
International (PRGI)**  
North Tower, #405  
1300 Pennsylvania Avenue, NW  
Washington, DC 20004  
Telephone: (202) 789-1500  
Fax: (202) 789-1601

**Program for Appropriate Technology  
in Health (PATH)**  
4 Nickerson Street, Suite 300  
Seattle, WA 98109-1699  
Telephone: (206) 285-3500  
Fax: (206) 285-6619  
<http://www.path.org>

**Project Concern International**  
3550 Afton Road  
San Diego, CA 92123  
Telephone: (619) 279-9690  
Fax: (619) 694-0294

**Public Health Institute (PHI)**  
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## PHN Center Activity Reference Matrix

Project Name	Project Implementor	Project Number	Award Number	Duration	Funding Accounts	PHN Strategic Support Objectives	Contracts Officer
<b>Contraceptives &amp; Logistics Management (CLM)</b>							
Central Contraceptive Procurement	N/A	936-3057	Various	1990-2003	PN, ESF, SAI, DA, DFA	SSO1	Tom Bordone
Family Planning Logistics Management (FPLM/CDC)	Centers for Disease Control and Prevention (CDC)	936-3038.01	HRN-P-00-97-00014-00	10/97-9/02	PN, DA, ESF, SAI, NIS, DFA	SSO1	Tom Bordone
Family Planning Logistics Management (FPLM/JSI)	John Snow, Inc. (JSI)	936-3038.02	CCP-C-00-95-00028-00	9/95-9/00	PN, DA, ESF, SAI, NIS, DFA	SSO1	Tom Bordone
<b>Communication, Management &amp; Training (CMT)</b>							
Family Planning Management Development (FPMd)	Management Sciences for Health (MSH)	936-3055	CCP-A-00-95-00000-00	9/95-9/00	PN, DFA, HE, AEE, ESF, SAI	SSO1	Tom Bordone
Information, Education, and Communication Support Project (IEC)	Johns Hopkins University (JHU)	936-3052	CCP-A-00-96-90001-00	11/95-11/00	PN, DFA, DAF, HE, DG, CS, AEE, NIS, ESF, SAI	SSO1	Tom Bordone
Population Fellows Program (Michigan Fellows)	University of Michigan	936-3054	CCP-A-00-95-00004-00	4/95-4/00	PN, DFA, HE, DG, CS, AEE, NIS, ESF, SEED	SSO1	Tom Bordone
Population Information Program (PIP)	Johns Hopkins University (JHU)	936-3052	HRN-A-00-97-00009-00	4/97-3/02	PN, DFA, DAF, HE, DG, CS, AEE, NIS, ESF, SAI	SSO1	Tom Bordone
Population Leaders Program (PLP)	Public Health Institute (PHI)	936-3070	CCP-A-00-94-00014-00	9/94-9/00	PN, HE, CS, DG, DFA, ESF, AEE, SAI	SSO1	Tom Bordone
Primary Providers' Training and Education in Reproductive Health (PRIME)	INTRAH, University of North Carolina	936-3072	CCP-C-00-95-00005-00	1/95-1/00	PN, DFA, HE, DG, ESF, SEED, NIS	SSO1	Tom Bordone
Training in Reproductive Health III	JHPIEGO Corporation	936-3069	HRN-A-00-98-00041-00	10/98-9/03	PN, DFA, NIS, HE, DG	SSO1	Tom Bordone
<b>Family Planning Services (FPSD)</b>							
Commercial Market Strategies (CMS)	Deloitte Touche Tohmatsu	936-3085	HRN-C-00-98-00039-00	10/98-9/03	DA, CHS, ESF, AEEB, NIS	SSO1	Tom Bordone
Family Planning Services (Pathfinder)	Pathfinder International	936-3062	CCP-A-00-92-00025-00	9/92-9/00	PN, DFA, ESF, CS, NIS	SSO1	Tom Bordone
Family Planning Service Expansion and Technical Support II (SEATS II)	John Snow, Inc. (JSI)	936-3048	CCP-C-00-94-00004-00	1/95-1/00	PN, DFA, NIS, DG, CS, ESF, HE, SAI, ARDN	SSO1	Tom Bordone
FOCUS on Young Adults	Pathfinder International	936-3073	CCP-A-00-96-90002-00	11/95-11/00	PN, DFA, NIS, DAF, ESF, AEE	SSO1	Tom Bordone
International Planned Parenthood Federation (IPPF/London)	International Planned Parenthood Federation/London (IPPF/L)	936-3071	CCP-G-00-93-00013-00	8/93-8/01	PN, DFA, NIS	SSO1	Tom Bordone
IPPF Endowments	International Planned Parenthood Federation/Western Hemisphere Region (IPPF/WHR)	N/A	N/A	N/A		SSO1	Tom Bordone
Linkages: Breastfeeding and LAM, and Related Maternal and Young Child Nutrition	Academy for Educational Development (AED)	936-3082.01	HRN-A-00-97-00007-00	11/96-10/01	DA, PN, DFA, CS, DG, HE	SSO1	Tom Bordone

## Policy & Evaluation (P&E)

Population and Family Planning Expansion (CARE)	Cooperative for Assistance and Relief Everywhere (CARE)	936-3058	DPE-A-00-91-00011-00	5/91-6/99	PN, DFA	SSO1	Tom Bordone
Program for Voluntary Surgical Contraception and Related Services	AVSC International	936-3068	HRN-A-00-98-00042-00	9/98-8/03	PN, DFA, ESF, NIS	SSO1	Tom Bordone
PVO/NGO Networks: CARE MoRR	Cooperative for Assistance and Relief Everywhere (CARE)	936-3084.02	HRN-A-00-98-00023-00	7/98-7/01	DA, CHS, ESF, NIS, AEEB	SSO1	Tom Bordone
PVO/NGO Networks: ENABLE	The Centre for Development and Population Activities (CEDPA)	936-3084.03	HRN-A-00-98-00009-00	2/98-2/01	DA, CHS, ESF, NIS, AEEB	SSO1	Tom Bordone
PVO/NGO Networks: PVO/NGO Networks for Health	Save the Children	936-3084.01	HRN-A-00-98-00011-00	3/98-3/03	DA, CHS, ESF, NIS, AEEB	SSO1	Tom Bordone
Demographic and Health Surveys (DHS)	Macro International, Inc.	936-3023	CCP-C-00-92-00012-00 CCP-Q-00-92-00013-00	9/92-6/99	PN, HE, CS, AIDS	SSO1	Tom Bordone
East-West Center Program on Population (EWCPOP)	The East-West Center Program on Population (EWCPOP)	936-3078	CCP-A-00-93-00015-00	8/93-6/99	PN, DFA, DAF	SSO1	Tom Bordone
Expert Studies of Population Issues	The National Academy of Sciences (NAS)	936-3078	CCP-A-00-95-00024-00	9/95-9/00	PN, DFA, DAF, NIS, ESF, AEE	SSO1	Tom Bordone
MEASURE: BUCEN Survey and Census Information Leadership, and Self-Sufficiency (BUCEN-SCILS)	U.S. Bureau of the Census (BUCEN)	936-3083.04	HRN-P-00-97-00016-00	9/97-9/02	PHN, DA, CHS, ESF, NIS, AEEB	SSO1	Tom Bordone
MEASURE Communication	Population Reference Bureau (PRB)	936-3083.03	HRN-A-00-98-00001-00	10/97-9/02	PHN, DA, CHS, ESF, NIS, AEEB	SSO1	Tom Bordone
MEASURE CDC	Centers for Disease Control and Prevention (CDC)	936-3038.01	HRN-P-00-97-00014-00	10/97 - 9/02	PHN, DA, CHS, ESF, NIS, AEEB	SSO1	Tom Bordone
MEASURE DHS+	Macro International, Inc	936-3083.01	HRN-C-00-97-00019-00	10/97-9/02	PHN, DA, CHS, ESF, NIS, AEEB	SSO1	Tom Bordone
MEASURE Evaluation	Carolina Population Center, University of North Carolina	936-3083.02	HRN-A-00-97-00018-00	9/97-9/02	PHN, DA, CHS, ESF, NIS, AEEB	SSO1	Tom Bordone
The POLICY Project	The Futures Group International	936-3078	CCP-C-00-95-00023-00	9/95-8/00	PN, DFA, DAF, NIS, ESF, AEE	SSO1	Tom Bordone
Women's Studies Project	Family Health International (FHI)	<b>EXPIRED</b>	<b>EXPIRED</b>	<b>EXPIRED</b>	<b>EXPIRED</b>	<b>EXPIRED</b>	<b>EXPIRED</b>
Contraceptive Research and Development (CONRAD III)	Eastern Virginia Medical School (EVMS)	936-3095	HRN-A-00-98-00020-00	8/98-8/03	DA, CHS PN, HE, CS, DG, DFA, AEE, ESF, SAI, NIS	SSO1	Tom Bordone
Contraceptive Technology Research (CTR)	Family Health International (FHI)	936-3079	CCP-A-00-95-00022-00	9/95-8/00		SSO1	Tom Bordone
Maximizing Access and Quality (MAQ) Initiative	Multiple	N/A	N/A	Ongoing		SSO1	Tom Bordone
Natural Family Planning & Reproductive Health Awareness (The AWARENESS Project)	Georgetown University/Institute for Reproductive Health (GU/IRH)	936-3088	HRN-A-00-97-00011-00	7/97-6/02	DA, AEE, NIS, ESF, CHS	SSO1	Tom Bordone
The Population Council Program (POP Council)	Population Council	936-3050	CCP-A-00-94-00013-00	9/94-9/99	PN, HE, DG, CS, DFA, ESF, AEE, NIS	SSO1	Tom Bordone

## Research

Population Front Office (POP)	Population Technical Assistance (POPTECH)	Basic Health Management, International (BHM)	936-3024	CCP-C-00-93-00011-00 CCP-Q-00-93-00012-00	12/93-4/99	PN, DFA, CHS, NIS, AEEB, ESF	SSO1	Tom Bordone
	Reproductive Health Operations Research (FRONTIERS)	Population Council	936-3086	HRN-A-00-98-00012-00	6/98-5/03	DA, AEEB, NIS, ESF	SSO1	Tom Bordone
							SSO1	
Child Survival (CS)	Population Program Activities Support (PPAS) Support Services Contract	PaL-Tech, Inc.	936-3070	HRN-C-00-98-00008-00	7/98-7/03	PN, HE, CS, DG, DFA, ESF, AEE, SAI	SSO1	Tom Bordone
	Acute Respiratory Infections Vaccine Project (ARIVAC)	Program for Appropriate Technologoy in Health (PATH)	936-6000.04	HRN-A-00-95-00025-00	9/95-9/00	DAF, DFA, ESF, NIS	SSO3, SSO5	Tom Bordone
	Basic Support for Institutionalizing Child Survival (BASICS)	The Partnership for Child Health Care, Inc., (a joint venture of AED, JSI, MSH )	936-6006.01	HRN-C-00-93-00031-00 HRN-Q-00-93-00032-00	9/93-6/99	DAF, DFA, PN, ESF, NIS, CSD	SSO3	Tom Bordone
	The CHANGE Project: Behavior Change Innovation/State-of-the-Art Activity	Academy for Educational Development (AED)/ The Manoff Group	936-3096.04	HRN-A-00-98-00044-00	9/98-9/03	CSD, DA, NIS, ESF, AEEB	SSO3	Tom Bordone
	Child Health Research: (Applied Research in Child Health (ARCH))	Harvard Institute for International Development	936-5986.09	HRN-A-00-96-90010-00	8/96-7/01	DAF, DFA, PN, AEE, ESF, IDA, NIS	SSO3, SSO5	Tom Bordone
	Child Health Research: (Family Health and Child Survival)	Johns Hopkins School of Public Health	936-5986.05	HRN-A-00-96-9006-00	1/96-12/00	DAF, DFA, PN, AEE, ESF, IDA, NIS	SSO3, SSO5	Tom Bordone
	Child Health Research: (ICDDR,B: Centre for Health and Population Research, Bangladesh)	International Centre for Diarrhoeal Disease Research, Bangladesh (ICDDR,B)	936-5986.06	HRN-A-00-96-90005-00	1/96-12/00	DAF, DFA, PN, AEE, ESF, IDA, NIS	SSO3	Tom Bordone
	Child Health Research: INCLEN	International Clinical Epidemiology Network (INCLEN)	936-5991.03	TBD	TBD	DAF, DFA, PN, AEE, ESF, IDA, NIS	TBD	Tom Bordone
	Child Health Research: (World Health Organization/Child and Adolescent Health (WHO/CAH))	World Health Organization (WHO)	936-5986.08	AAG-G-00-97-00024-00	9/96-9/00	DAF, DFA, PN, AEE, ESF, DA, NIS	SSO3	Duff Gillespie
	Child Survival Flagship Activity	TBD	936-3096.01	TBD	5 years	CSD, DA, ESF, AEEB, NIS	SSO3, SSO5	Tom Bordone
	Children's Vaccine Initiative (CVI): Children's Vaccine Program (CVP))	World Health Organization (WHO) Children's Vaccine Initiative	936-6000.06	AAG-G-00-97-00022-00	9/96-9/00	DAF, DFA, ESF, NIS	SSO3	Duff Gillespie
	HealthTech III: (Technologies for Child Health)	Program for Appropriate Technology in Health (PATH)	936-5968.03	HRN-A-00-96-90007-00	2/96-1/01	DAF, PN	SSO2, SSO3, SSO4, SSO5	Tom Bordone
	Helen Keller International (HKI)	Helen Keller International (HKI)	936-5122.04	HRN-A-00-98-00013-00	10/97-3/03	DAF, DFA	SSO2, SSO3	Tom Bordone
	Maternal and Child Health Technical Assistance and Support Contract (TASC)	Clapp and Mayne, CID, DAI, EDC, JSI, MSH, PATH, URC	936-3096.02	HRN-I-00-98-00028-00 to HRN-I-00-98-00035-00	9/98-9/03	CSD, DA, NIS, ESF, AEEB	SSO3	Tom Bordone
	Micronutrient Global Leadership	International Life Sciences Institute Research Foundation (ILSI)	936-5122.02	HRN-A-00-93-00046-00	9/93-9/99	DAF, DFA	N/A	Tom Bordone
	Micronutrient Operational Strategies and Technologies (MOST)	International Science and Technology Institute (ISTI)	936-3094.02	HRN-A-00-98-00047-00	9/98-9/03	DA, CSD, AEEB, NIS	SSO2, SSO3	Tom Bordone
	Micronutrients for Health	Johns Hopkins University (JHU)	936-5122.05	HRN-A-00-97-00015-00	8/97-9/02	DAF, DFA	SSO2, SSO3	Tom Bordone
	Polio Eradication and Immunization Support	UNICEF (Africa)	936-3080.01	AAG-G-00-97-00021-00	6/95-9/02	AEEB, ESF, DAF, DFA, NIS	SSO3	Duff Gillespie

Polio Eradication and Immunization Support	UNICEF (Asia)	936-3080.02	AAG-G-00-97-00020-00	6/95-9/02	AEEB, ESF, DAF, DFA, NIS	SSO3	Duff Gillespie
Polio Eradication and Immunization Support	World Health Organization (WHO)	936-3080.03	AAG-G-00-97-00019-00	6/95-9/02	AEEB, ESF, DAF, DFA, NIS	SSO3	Duff Gillespie
Polio Eradication and Immunization Support	CORE/World Vision	936-3080.04	HRN-A-00-98-00053-00	9/98-9/02	AEEB, ESF, DAF, DFA, NIS	SSO3	Tom Bordone
U.S. Peace Corps: (Health Resources Support II)	U.S. Peace Corps	936-6004.52	HRN-P-00-95-00015-00	8/86-9/00	DAF, DFA, PN, AEEB, ESF, IDA, NIS, CSD	N/A	Tom Bordone
Vaccine Independence Initiative (VII): (Children's Vaccine Program (CVP))	UNICEF	936-6000.01	HRN-G-00-92-00011-00	1/92-7/00	ESF, NIS, DAF, DFA	SSO3	Duff Gillespie
Vaccine Quality Assurance Training Program: (International Children's Vaccine Training Program (IVP))	Massachusetts Biologic Laboratories (MBL)	936-6000.05	HRN-A-00-95-00023-00	9/95-9/00	ESF, NIS, DAF, DFA	SSO3	Tom Bordone
<b>Environmental Health (EH)</b>							
Africa Integrated Malaria Initiative (AIMI)	N/A	936-3081	N/A	9/96-9/02	N/A	N/A	N/A
AIMI-AFRICARE	Africare	936-5994.04	HRN-A-00-98-00016-00	2/98-9/01	DAF, DFA, ESF, NIS		Tom Bordone
AIMI-AMREF	AMREF	936-5994.06	HRN-A-00-98-00004-00	4/98-9/01	DAF, DFA, ESF, NIS	SSO3	Tom Bordone
AIMI-PSI/Bednet	Population Services International (PSI)	936-5994.05	HRN-G-00-98-00005-00	2/98-1/01	DAF, DFA, ESF, NIS	SSO2, SSO3	Tom Bordone
Centers for Disease Control and Prevention (CDC) IAA: (Infectious Diseases Results Package)	Centers for Disease Control and Prevention (CDC)	936-5994.08	AAG-P-00-98-00003-00	9/98-9/03	HE, DFA, ESF, ARDN, CSD, PSEE, NIS	SSO2, SSO3, SSO4, SSO5	Duff Gillespie
Displaced Children and Orphans Fund: (Health Resources Support II)	N/A	936-6004.50	N/A	N/A	DAF, PN, CSD, ESF, DFA, NIS, AEEB	SSO3	N/A
Environmental Health Project (EHP)	Camp Dresser & McKee	936-5994.01	HRN-C-00-93-00036-00 HRN-Q-00-93-00037-00	3/93-3/99	DAF, DFA, ESF, NIS	SSO3, SSO5	Tom Bordone
Malaria Vaccine Development Program (MVDP)	Various	936-6001	Various	5/92-4/02	DAF, DFA	SSO3, SSO5	Tom Bordone
NeTMark	TBA	936-5994.09	TBA	5 years	DAF, DFA, ESF, NIS	SSO5	Tom Bordone
Office of International and Refugee Health/DHHS (Health Resources Support II)	Office of International and Refugee Health (OIRH), Department of Health and Human Services (DHHS)	936-6004.01	HRN-P-HI-92-00057-00	9/93-9/02	DAF, DFA, PN, AEEB, ESF, IDA, NIS, CSD	SSO3	Tom Bordone
Onchocerciasis Control Program (OCP)	World Bank	698-0485.01	AAG-G-00-97-00025-00	9/92-12/02	DFA, DA, CSD		Duff Gillespie
The Patrick J. Leahy War Victims Fund: (Health Resources Support II)	N/A	936-6004.55	N/A	N/A	DAF, PN, CSD, ESF, DFA, NIS, AEEB		N/A
World Health Organization Umbrella Grant: (Infectious Diseases Results Package)	World Health Organization (WHO)	936-5994.01	AAG-G-00-98-00008-00	9/98-9/03	HE, DFA, ESF, ARDN, CSD, PSEE, NIS	SSO2, SSO3, SSO5	Duff Gillespie
<b>Health Policy &amp; Sector Reform (HPSR)</b>							
CDC/Infotech: (Data for Decision Making)	Centers for Disease Control and Prevention (CDC)	936-5994.08	AAG-P-00-98-00003-00	4/91-12/03	DAF, DFA, ESF, NIS	SSO2, SSO3, SSO4, SSO5	Duff Gillespie



## HIV-AIDS

Center for International Health Information (CIHI): (Data for Decision Making)	Information Management Consultants, Inc. (IMC)	936-5991.05	HRN-C-00-93-00041-00 HRN-Q-00-93-00042-00	9/93-1/99	DAF, ESF, IDA	SSO1, SSO2, SSO3, SSO4, SSO5	Tom Bordone
DDM/Harvard: (Data for Decision Making)	Harvard School of Public Health (HSPH)	936-5991.01	DPE-A-00-91-00052-00	4/91-6/99	DAF, ESF, IDA	N/A	Tom Bordone
Global Health Council (formerly NCIH): (Health Resources Support II)	Global Health Council/NCIH	936-6004.43	DPE-A-00-91-00010-00	5/91-7/99	DAF, DFA, PN, AEEB, ESF, IDA, NIS, CSD	SSO2, SSO3, SSO4	Tom Bordone
Monitoring, Evaluation, and Design/Assessment Support (MEDS)	TBD	936-3096.03	TBD	1/99-1/04	CSD, DA, NIS, ESF, AEEB	SSO2, SSO3	Tom Bordone
Partnerships for Health Reform (PHR)	Abt Associates, Inc.	936-5974.13	HRN-C-00-95-00024-00	10/95-10/00	DAF, AEEB, NIS	SSO2, SSO3, SSO5	Tom Bordone
Quality Assurance II: (Applied Research in Child Survival Services)	Center for Human Services	936-5992.02	HRN-C-00-96-90013-00	9/96-9/01	DAF, DFA, ESF, NIS, AEEB	SSO2, SSO3, SSO5	Tom Bordone
Rational Pharmaceutical Management (MSH)	Management Sciences for Health (MSH)	936-5974.08	HRN-A-00-92-00059-00	9/92-9/99	DAF, AEEB, NIS	SSO2, SSO3, SSO5	Tom Bordone
Rational Pharmaceutical Management (USP)	U.S. Pharmacopeial Convention, Inc. (USP)	936-5974.09	HRN-A-00-92-00052-00	9/92-9/99	DAF, AEEB, NIS	SSO3, SSO5	Tom Bordone
WHO Strengthening of Health Services (SHS) Grant	World Health Organization (WHO)	936-5974.04	AAG-G-00-97-00007-00	9/97-9/99	DAF, AEEB, NIS	SSO3	Tom Bordone
AIDS Social Marketing (AIDSMARK)	Population Services International (PSI)	936-3090.03	HRN-A-00-97-00021-00	9/97-9/02	CSD, DA, AEEB, NIS, ESF	SSO4	Tom Bordone
Design/Monitoring & Evaluation/Lessons Learned/Dissemination (DMELLD)	TBD	TBD	TBD	TBD	CSD, DA, AEEB, NIS, ESF	SSO4	Tom Bordone
Global Health Council (formerly NCIH)	Global Health Council/NCIH	936-6004.43	DPE-A-00-91-00010-00	5/91-7/99	CSD, DA, AEEB, NIS, ESF	SSO4	Tom Bordone
HIV Operations Research (HORIZONS)	Population Council	936-3090.01	HRN-A-00-97-00012-00	8/97-7/02	CSD, DA, AEEB, NIS, ESF	SSO4	Tom Bordone
Implementing AIDS Prevention and Control Activities (IMPACT)	Family Health International (FHI)	936-3090.02	HRN-A-00-97-00017-00	9/97-9/02	CSD, DA, AEEB, NIS, ESF	SSO4	Tom Bordone
International HIV/AIDS Alliance	International HIV/AIDS Alliance	936-3090.07	HRN-G-00-98-00010-00	1/98-12/02	CSD, DA, AEEB, NIS, ESF	SSO4	Tom Bordone
Joint United Nations Programme on HIV/AIDS (UNAIDS)	Joint United Nations Programme on HIV/AIDS (UNAIDS)	936-3090.08	AAG-G-00-97-00006-00	9/97-9/02	CSD, DA, AEEB, NIS, ESF	SSO4	Duff Gillespie
U.S. Bureau of the Census	U.S. Bureau of the Census (BUCEN)	936-3090.05	HRN-P-00-98-00002-00	1/98-12/02	CSD, DA, AEEB, NIS, ESF	SSO4	Tom Bordone
U.S. Peace Corps	U.S. Peace Corps	936-3090.06	AAG-P-00-97-00008-00	9/97-9/02	CSD, DA, AEEB, NIS, ESF	SSO4	Duff Gillespie
<b>Nutrition &amp; Maternal/Infant Health (NMH)</b>							
FOCUS on Young Adults	Pathfinder International	936-3073	CCP-A-00-96-90002-00	11/95-11/00	DAF, ESF, AEEB, PN, DFA, NIS	SSO2, SSO3	Tom Bordone
Food and Nutrition Technical Assistance (FANTA)	Academy for Educational Development (AED)	936-3094.01	HRN-A-00-98-00046-00	8/98-9/03	DA, CSD, AEEB, NIS	SSO2, SSO3	Tom Bordone

## Health & Nutrition Front Office (HN)

Food Technology and Enterprise (Project SUSTAIN)	National Cooperative Business Association (NCBA)	936-5120.01	DAN-A-00-91-00066-00	4/91-9/99	DAF	SSO2, SSO3	Tom Bordone
Linkages: Breastfeeding and LAM, and Related Maternal and Young Child Nutrition	Academy for Educational Development (AED)	936-3082.01	HRN-A-00-97-00007-00	11/96-10/01	DAF, AESF, NIS, AEEB	SSO2, SSO3	Tom Bordone
Maternal and Neonatal Health Program	JHPIEGO Corporation	936-3092.01	HRN-A-00-98-00043-00	10/98-9/03	DA, CSD, AEEB, NIS	SSO2, SSO3	Tom Bordone
MotherCare III	John Snow, Inc. (JSI)	936-5966.10	HRN-C-00-98-00050-00	9/98-9/00	DAF, DG, PSEE, NIS	SSO2	Tom Bordone
UNICEF II Grant	UNICEF	936-3092	AAG-G-00-98-00002-00	9/98-9/03	DA, CSD, AEEB, NIS	SSO2	Duff Gillespie
WHO Reproductive Health	World Health Organization (WHO)	936-5966.09	AAG-G-00-97-00016-00	9/97-9/00	DAF, DG, PSEE, NIS	SSO2	Duff Gillespie
Health and Child Survival Fellows (HCSF) Program	Johns Hopkins University (JHU)	936-6004.09	HRN-A-00-97-00020-00	10/97-9/02	DAF, DFA, PN, AEEB, ESF, IDA, NIS, CSD	SSO1, SSO2, SSO3, SSO4, SSO5	Tom Bordone
Technical Advisors in AIDS and Child Survival (TAACS)	Office of International and Refugee Health/Centers for Disease Control and Prevention (OIRH/CDC)	936-5970.02	HRN-P-00-98-00015-00	5/03	DAF, DFA, PN, AEEB, ESF, NIS	SSO1, SSO2, SSO3, SSO4, SSO5	Tom Bordone
Technical Advisors in AIDS and Child Survival (TAACS)	The Centre for Development and Population Activities (CEDPA)	936-5970.03	HRN-C-00-98-00006-00	8/03	DAF, DFA, PN, AEEB, ESF, NIS	SSO1, SSO2, SSO3, SSO4, SSO5	Tom Bordone
Technical Advisors in AIDS and Child Survival (TAACS)	The Centre for Development and Population Activities (CEDPA)	936-5970.38	HRN-C-00-96-90002-00	2/01	DAF, DFA, PN, AEEB, ESF, NIS	SSO1, SSO2, SSO3, SSO4, SSO5	Tom Bordone
Technical Advisors in AIDS and Child Survival (TAACS)	American Red Cross (ARC)	936-5970.36	HRN-C-00-92-00040-00	6/99	DAF, DFA, PN, AEEB, ESF, NIS	SSO1, SSO2, SSO3, SSO4, SSO5	Tom Bordone

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